

2004 CSBG Contract Change Session

- CSBG Contract language additions and deletions.
- Reporting Forms process and requirements for

Contract Term

- Changed from one-year to twoyears.
- January 1, 2004 through December 31, 2005.
- Aligned with the Community Action Plan and State Plan.

Exhibit B Page B2

- CSD Form 415 CSBG Program
 Report replaces the CSD Form 410
 Series.
- Submitted semi-annually.
- Consistency with CAP, Contract, Semi-annual reporting, and CSBG I/S Survey.

Section 7. Drug-Free Workplace Requirements

- Avoids filing a separate
 Certification for each contractor.
- Eliminates having to sign and return the STD, 21.

Section 7. Drug-Free Workplace Requirements

- Effective for the life of the contract.
- Standard contract language required by DGS.

Section 8. Internal Control Certification
System of internal accounting and administrative control:

- Documenting the system.
- Communicating system requirements.
- Assuring that the system is functioning as prescribed.

Section 8. Internal Control Certification

A system of internal accounting and administrative control shall include:

- Segregation of duties.
- Limited access to agency assets to authorized personnel.
- Authorization and record keeping procedures are adequate.

- Section 8. Internal Control Certification
 System of internal accounting and administrative control shall include:
- Established practices are followed.
- Personnel commensurate with responsibilities.
- Effective internal reviews.

Exhibit E Page E5

Section 5. Contractor Assurances and Certifications

- Adds OMB Circular language
- Title 22 of the California Code of Regulations states Grantees shall comply with OMB Circular A-110 and A-102.

Exhibit E Page E5

 OMB Circulars
 http://www.whitehouse.gov/ omb/circulars/

Exhibit E Page E10

Section 12. Administrative Hearing

- Deleted reference to 42 USC 8624(b)(13) in Section 12A. and all of Section 12B.
- Refers to LIHEAP Federal Law.

Amendment 1 Page 3

Exhibit B Section 2. A. 2) CSD Form 415

Report Period

January-June, 2004

January-Dec, 2004

January-June, 2005

January-Dec, 2005

Due Date

July 15, 2004

Jan 15, 2005

July 15, 2005

Jan 15, 2006

Amendment 1 Page 4

Exhibit D. Section 9.

Contractor Name Change

- Amendment is required.
- Reimbursement approved once name change is approved.

2004/05 CSBG REPORTING FORMS

- CLIENT CHARACTERISTIC REPORT – CSD 295-CCR (REV. 2/04)
- SAFETY NET CLIENT CONTACT REPORT – CSD 296-SNCC (NEW 3/01)
- PROGRAM REPORT CSD 415 (NEW 1/03)

CLIENT CHARACTERISTIC REPORT CSD 295-CCR (REV. 2/04)

WHAT IS THIS FORM USED FOR?
WHAT HAS CHANGED?
REPORTING REQUIREMENTS
MOST COMMON REPORTING
ERRORS

THE CSD 295 FORM IS USED FOR?

• REPORTING DEMOGRAPHICS ON ALL FAMILY DEVELOPMENT CASE MANAGEMENT CLIENTS AND SAFETY NET CLIENTS SERVED.

NOTE: COMPLETE DEMOGRAPHICS ARE REQUIRED FOR FAMILY DEVELOPMENT CLIENTS AND AGENCIES SHOULD MAKE EVERY ATTEMPT TO COLLECT DEMOGRAPHIC DATA ON SAFETY NET CLIENTS

WHAT HAS CHANGED?



- NUMBER 8 ETHNICITY/RACE BREAKDOWN
- NUMBER 9 –
 AGE 24 YRS AND OVER
- NUMBER 10 –
 OTHER
 CHARACTERISTICS

A CLOSER LOOK

• * THE SUM OF THIS CATEGORY SHOULD NOT EXCEED THE VALUE OF ITEM 2.

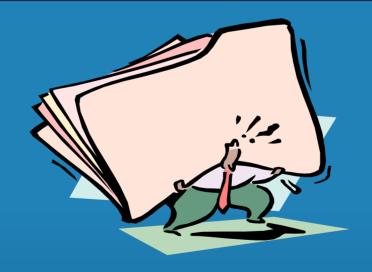
• ** THE SUM OF THIS CATEGORY SHOULD NOT EXCEED THE VALUE OF ITEM 7E-H.

A CLOSER LOOK

• *** THE SUM OF THIS
CATEGORY SHOULD NOT
EXCEED THE VALUE OF ITEM 4.

• *****THE NUMBERS REPORTED UNDER EITHER COLUMNS SHOULD NOT EXCEED THE VALUE OF ITEM 2.

A CLOSER LOOK



OFFICE OF MANAGEMENT AND BUDGET (OMB) WEBSITE

ETHNICITY STANDARDS

http://www.whitehouse.gov/omb/fedreg/1997standards/html

CSD FORM 295 REPORTING REQUIREMENTS

SEMI-ANNUAL



JANUARY-JUNE 2004 DUE: JULY 15, 2004

JULY-DECEMBER 2004 DUE: JANUARY 15, 2005

FIVE MOST COMMON REPORTING ERRORS

- INCORRECT SEMI-ANNUAL PERIOD
- INCORRECT CONTRACT NUMBER
- INCORRECT REPORTING FORM
- CATEGORY TOTALS EXCEED VALUES IN ITEMS 2 AND 4
- TOTAL OF 7E-H EXCEED NUMBER 9

SAFETY NET CLIENT CONTACT REPORT CSD 296-SNCC (NEW 3/01)

- WHAT IS THIS FORM USED FOR?
- REPORTING SAFETY NET CLIENTS ON THE CSD FORM 415 UNDER GOALS 5 AND/OR 6
- REPORTING REQUIREMENTS
- MOST COMMON REPORTING ERRORS

WHAT IS THE CSD 296 FORM USED FOR?

 REPORTING ONE-TIME SERVICES

• SERVICE/ACTIVITY THAT DOES NOT PROVIDE FOR AN ASSESSMENT PROCESS

WHAT IS THE CSD 296 FORM USED FOR?

 CLIENT CONTACT, (I.E, TELEPHONE CONVERSATION, CRISIS COUNSELING SESSION)

• REPORTING SAFETY NET CLIENTS ON THE CSD 415 UNDER GOALS 5 AND/OR 6

THREE OF THE MOST COMMONLY ASKED QUESTIONS REGARDING REPORTING SAFETY NET CLIENTS UNDER GOAL 5 AND/OR 6 ON CSD FORM 415

- Q: DO THE SAFETY NET CLIENTS
 REPORTED ON THE 296 HAVE TO
 MATCH/EQUAL THE DATA ON THE
 415 FOR GOALS 5 AND/OR 6.
- A: NO. IF YOU REPORTED SAFETY NET CLIENTS ON THE 296, THIS DATA MUST BE REPORTED ON THE 415.

REPORTING SAFETY NET CLIENTS UNDER GOAL 5 AND/OR 6 ON CSD FORM 415

Q: I'M A NEW STAFF PERSON AT THE AGENCY. WHICH GOAL DO I REPORT THE SAFETY NET CLIENTS?

A: CHECK THE AGENCY'S 2004/05 COMMUNITY ACTION PLAN FOR GOALS SPECIFIC TO YOUR AGENCY'S ACTIVITIES.

REPORTING SAFETY NET CLIENTS UNDER GOAL 5 AND/OR 6 ON THE CSD FORM 415

Q: I MISTAKENLY CHOSE THE INCORRECT GOAL IN THE COMMUNITY ACTION PLAN (CAP). WHAT SHOULD I DO?

A: CONTACT YOUR FIELD REPRESENTATIVE. REVISIONS TO YOUR CAP AND/OR CONTRACT WILL BE NECESSARY.

LET'S TAKE A LOOK AT THE CSD 296



CSD FORM 296 REPORTING REQUIREMENTS

SEMI-ANNUAL



JANUARY-JUNE 2004 DUE: JULY 15, 2004

JULY-DECEMBER 2004 DUE: JANUARY 15, 2005

TWO OF THE MOST COMMON REPORTING ERRORS ON CSD FORM 296

INCORRECT REPORTING PERIOD

• INCORRECT CONTRACT NUMBER

CSBG PROGRAM REPORT CSD 415 (NEW 1/03)

- 1. WHAT ARE THESE FORMS USED FOR?
- 2. DEFINE "STILL PROGRESSING" AND "EXITED PROGRAM PRIOR TO ACHIEVING OUTCOME".
- 3. ADDING MEASURES TO A PARTICULAR GOAL TO ACCURATELY REFLECT THE WORK YOUR AGENCY DOES.
- 4. HOW TO COLLECT AUTOMATED DATA TO DETERMINE OUTCOMES. 34

WHAT IS THE CSD FORM 415 USED FOR?

- COMMUNITY ACTION PLAN (CAP)
- CSBG CONTRACT FORM
- MID-YEAR PROGRESS REPORT
- ANNUAL REPORT

PROGRAM REPORT CSD-415 (NEW 1/03)

THIS FORM IS USED AS A SYSTEM TO DETERMINE CAP PROJECTIONS, GOALS, AS WELL AS CAPTURE CONTRACT PROJECTIONS AND GOALS OVER A TWO-YEAR PERIOD.

PROGRAM REPORT CSD-415 (NEW 1/03)

THE MID-YEAR PROGRESS
REPORT AND ANNUAL REPORT
WILL CAPTURE THE AGENCY'S
SUCCESS IN ACHIEVING THE
ESTABLISHED GOALS.

CSD FORM 415 "STILL PROGRESSING"

THE NUMBER OF UNITS THAT DID NOT ACHIEVE THE OUTCOME BUT CONTINUED TO RECEIVE SERVICES TO PROGRESS TOWARD THE OUTCOME.

CSD FORM 415 "EXITED PROGRAM PRIOR TO ACHIEVING OUTCOME"

THE NUMBER OF UNITS THAT DID NOT ACHIEVE THE OUTCOME AND ARE NO LONGER RECEIVING SERVICES.

A CLOSER LOOK



ADDING MEASURES

IT IS VERY IMPORTANT THAT THE 415 NOT BE ALTERED FOR THE PURPOSE OF ADDING MEASURES.

THE DATA IS AGGREGATED BY CSD BASED ON THE MEASURES NASCSP HAS IDENTIFIED FOR EACH GOAL.

IF THE AGENCY CANNOT REFLECT THE WORK THAT IS BEING DONE BY THE MEASURES PROVIDED, CONTACT YOUR FIELD REPRESENTATIVE.

COLLECTING AUTOMATED DATA TO DETERMINE OUTCOMES

CSD HAS NOT IMPLEMENTED A PROCESS FOR AGENCIES TO COLLECT AUTOMATION DATA.
THIS PROJECT WILL BE IMPLEMENTED IN THE FUTURE.

NATIONAL GOALS & MEASURES WEBSITE

http://www.nascsp.org/publications/ pubs.htm

HELPFUL HINTS

- · CHECK THE CORRECT REPORT PERIOD.
- INDICATE THE CORRECT CONTRACT NUMBER.
- USE THE CORRECT REPORTING FORMS.
- SEND REPORTS TIMELY.

HELPFUL HINTS

- ALL GOALS MUST BE SUBMITTED BY THE REPORTING PERIOD DUE DATE, EVEN IF THE AGENCY DOES NOT UTILIZE A SPECIFIC GOAL.
- SEND FORMS TO CORRECT E-MAIL ADDRESS: <u>CSBGreports@csd.ca.gov</u>
- IF REVISING REPORTS, INDICATE "REV" IN THE E-MAIL SUBJECT LINE.

HELPFUL HINTS

- ALL COLUMNS MUST BE FILLED OUT ON THE MID-YEAR AND ANNUAL 415 REPORT FOR GOALS THAT REFLECT YOUR AGENCY'S ACTIVITIES. DO NOT LEAVE ANY BLANKS.
- DO NOT PUT ZEROS IN COLUMNS/GOALS UNRELATED TO YOUR AGENCY'S ACTIVITIES. LEAVE THESE MEASURES BLANK.

THANK YOU FOR ATTENDING THE 2004/05 CSBG CONTRACT AND REPORTING FORMS REVIEW SESSION



DEPARTMENT OF COMMUNITY SERVICES AND DEVELOPMENT

700 North 10th Street, Room 258 Sacramento, CA 95814 (916) 341-4200 (916) 341-4203 (FAX) (916) 327-6318 (TDD)



March 16, 2004

To All Community Services Block Grant Contractors:

2004/05 Community Services Block Grant Contract (CSBG) Amendment No. 1

Enclosed is your agency's packet for Amendment No. 1 to the agreement with the Department of Community Services and Development (CSD) for the 2004/05 Community Services Block Grant Program. It includes an allocation spreadsheet, <u>two</u> complete copies of the contract amendment (face sheet, revised language, and a replacement attachment).

In order to expedite the execution of your amendment packet, please observe the following instructions, and feel free to use this letter as a checklist.

Submit a governing board resolution with an original signature of your board's authorized representative. The board's resolution must identify whom it has authorized to sign the 2004. CSBG contract and any amendments.	/05
Complete the section labeled "Contractor's Name" on both face sheets. Print or type the name and title of the person who is authorized to sign the contract. Print the date signed. Ensure that your agency's authorized representative has signed both face sheets. Your agency's authorized representative is the person whom the governing board has specified in its resolution the official representative to sign the 2004/05 CSBG contract and, if applicable, any amendment	it n a
The following attachment is part of the amendment packet. Please complete, and return all conwith the amendment packet.	oies
Exhibit B BUDGET DETAIL AND PAYMENT PROVISIONS (ATTACHMENT I, CSBG FISCAL DATA)	
When you return the contract packet to CSD, please arrange all pages, including the face sheet exhibits, and all attachments, in the same order in which you received them. Include your boar	-

resolution, insurance and fidelity bond documents, advance request, and, if desired, a transmittal

letter, but do not staple or otherwise attach these documents to the contracts themselves.

2004/05 CSBG March 16, 2004 Page 2

Please return your completed amendment packet within 30 days (45 days for public agencies) to:

Contract Services Unit Department of Community Services and Development 700 North 10th Street, Room 258 Sacramento, CA 95814

Please keep in mind that in order for CSD to execute your contract, all of your agency's contract documents must be **complete**. Authorized persons must sign the board resolution, both face sheets, and applicable exhibits and attachments. Except as waived for self-insured governmental entities, the Certificate of Liability Insurance must name CSD as the Certificate Holder and as an additional insured, except for workers' compensation and fidelity bond. Insurance documents that are on file at CSD must be current or replaced. Coverage must include workers' compensation insurance, fidelity bond, general liability, and vehicle insurance.

If you have questions regarding the contracting process, you may contact Brenda Carradine of my staff at (916) 341-4262. For questions regarding contractual requirements, reporting forms, insurance coverage, or other requirements, please contact your Field Representative.

Sincerely,

Fernando Negrete Manager, Contract Services Unit

FN:BAC Enclosures

\Cobra\Shared\Contracts\Community Services Block Grant\2004 Community Services Block Grant\2004 05 CSBG Am 1 CSU Transmittal 3 9 04.doc

Page 1 of 2

Initial Allocation: \$11,131,215 Second Allocation \$32,482,416

			Second Alloca	ition	\$32,482,416	
		Allocation	2003 FY	2004 FY	2004 FY	2004 FY
		Percentages	Allocation	Initial	Second	Total
	_	Based On	W/O	Allocation	Allocation	Allocation
County	Agency	2000 Census	Backfill			W/Backfill
Alamada	Dankalau CAA	0.00444	474 505	44.500	400.000	474 505
Alameda	Berkeley CAA	0.00414	174,535	44,569	129,966	174,535
Alameda	ACAP	0.01292	544,683	139,090	405,593	544,683
Alameda	Oakland, City of Soc Serv Dept	0.01625	685,069	174,939	510,130	685,069
Alpine	Inyo Mono Advocates for Comm Action	0.00005	2,108	538	1,570	2,108
Amador/Tuolumne	Amador/Tuolumne CAA	0.00181	173,556	43,968	129,588	173,556
Butte	Butte Co CAA	0.00832	350,755	89,569	261,186	350,755
Calaveras/Mariposa	Calaveras/Mariposa CAA	0.00153	173,556	43,968	129,588	173,556
Colusa	SEE GLENN					
Contra Costa	Contra Costa Comm Srvcs Dept	0.01521	641,225	163,743	477,482	641,225
Del Norte	Del Norte Co Board of Sup.	0.00101	42,580	10,873	31,707	42,580
El Dorado	El Dorado Co. Dept of Sr. & Fam. Srvcs	0.00235	173,556	43,968	129,588	173,556
Fresno	Fresno EOC	0.03805	1,604,116	409,627	1,194,489	1,604,116
Glenn/Colusa/Trinity	Glenn Co Human Resources Agency	0.00214	173,556	43,968	129,588	173,556
Humboldt	Redwood CAA	0.00511	215,428	55,012	160,416	215,428
Imperial	Campesinos Unidos, Inc.	0.00631	266,018	67,930	198,088	266,018
Inyo/Mono	Inyo Mono Advocates for Comm Action	0.00079	173,556	43,968	129,588	173,556
Kern	Kern Co EOC	0.02783	1,173,260	299,604	873,656	1,173,260
Kings	Kings Co CAO	0.00453	190,976	48,768	142,208	190,976
Lake	Lake County CAA	0.00214	173,556	43,968	129,588	173,556
Lassen/Plumas/Sierra	Lassen/Plumas/Sierra Co	0.00139	173,556	43,968	129,588	173,556
Los Angeles	Center for Community & Family Services, Inc.	0.00817	344,432	87,954	256,478	344,432
Los Angeles	Long Beach CSDC	0.02198	926,635	236,626	690,009	926,635
Los Angeles	Los Angeles Co DC & SCS	0.15547	6,554,321	1,673,713	4,880,608	6,554,321
Los Angeles	Los Angeles, City of, CDD, HSNDD	0.17021	7,175,731	1,832,396	5,343,335	7,175,731
Madera	Madera Co CAA	0.00521	219,644	56,088	163,556	219,644
Marin	Marin Community Action	0.00332	173,556	43,968	129,588	173,556
Mariposa	(Mariposa Co Brd of Suprs)(SEE CALAVERAS)					
Mendocino	North Coast Opportunity	0.00287	173,556	43,968	129,588	173,556
Merced	Merced Co CAA	0.00957	403,453	103,026	300,427	403,453
Modoc/Siskiyou	Modoc/Siskiyou CAA	0.00214	173,556	43,968	129,588	173,556
Mono	SEE INYO					
Monterey	Monterey Co	0.01098	462,896	118,205	344,691	462,896
Napa	Community Action of Napa Valley	0.00211	173,556	43,968	129,588	173,556
Nevada	Nevada Co CAA	0.00156	173,556	43,968	129,588	173,556
Orange	Orange Co CDC	0.06151	2,593,145	662,186	1,930,959	2,593,145
Placer	Placer Co CSD	0.00303	173,556	43,968	129,588	173,556
Plumas	SEE LASSEN		-,	-,	,,,,,,,	-,
Riverside	Riverside, Co of, Dept of Comm. Act.	0.04549	1,917,772	489,723	1,428,049	1,917,772

COMMUNITY SERVICES AND DEVELOPMENT CSBG 2004 FY Allocations

Page 2 of 2

	Allocation	2003 FY	2004 FY	2004 FY	2004 FY
	Percentages	Allocation	Initial	Second	Total
	Based On	W/O	Allocation	Allocation	Allocation
Agency	2000 Census	Backfill			W/Backfill
	0.03608	1,521,064	388,419	1,132,645	1,521,064
Co CAA	0.00111	173,556	43,968	129,588	173,556
rdino CP CSD	0.05597	2,359,589	602,545	1,757,044	2,359,589
, Co of, Dept of Soc Serv	0.07191	3,031,589	774,147	2,257,442	3,031,589
isco EOC	0.01840	775,709	198,085	577,624	775,709
in Co Dept of Aging	0.02063	869,722	222,092	647,630	869,722
bispo, EOC of	0.00633	266,861	68,146	198,715	266,861
o, CAA of	0.00865	364,668	93,122	271,546	364,668
oara, CAA of	0.01171	493,671	126,064	367,607	493,671
	0.02645	1,115,082	284,748	830,334	1,115,082
z, CAB of	0.00624	263,067	67,177	195,890	263,067
CAA	0.00522	220,065	56,196	163,869	220,065
EN					
OC					
fety Net Consortium JPA	0.00666	280,773	71,698	209,075	280,773
o PEO	0.00772	325,461	83,110	242,351	325,461
	0.01496	630,685	161,052	469,633	630,685
CAA	0.00256	173,556	43,968	129,588	173,556
o Brd of Supvs	0.00202	173,556	43,968	129,588	173,556
IN					
cs & Employ Train	0.01840	775,709	198,085	577,624	775,709
DOR					
CHD	0.01456	613,822	156,746	457,076	613,822
ept of Employment & Social Services	0.00633	266,861	68,146	198,715	266,861
SD	0.00259	173,556	43,968	129,588	173,556
o ep	CHD ot of Employment & Social Services	CHD 0.01456 ot of Employment & Social Services 0.00633	CHD 0.01456 613,822 ot of Employment & Social Services 0.00633 266,861	CHD 0.01456 613,822 156,746 ot of Employment & Social Services 0.00633 266,861 68,146	CHD 0.01456 613,822 156,746 457,076 ot of Employment & Social Services 0.00633 266,861 68,146 198,715

TOTAL, all counties

1.00000 43,613,631 11,131,215 32,482,416 43,613,631

Approval:

Contractor agrees to continue to provide services and activities to eligible participants residing in the designated service area, pursuant to Government Code Section 12725 et seq., and 42 United States Code (USC) 9901 et seq., as amended, the Community Services Block Grant Act.

1. The total consideration payable by the State to Contractor under this Agreement is changed from \$---- to \$----, reflecting an increase of \$----.

- 2. Exhibit B, Budget Detail and Payment Provisions, ATTACHMENT I, CSBG FISCAL DATA, shall be replaced in its entirety by the revised Exhibit B, Budget Detail and Payment Provisions, ATTACHMENT I, CSBG FISCAL DATA, attached hereto and incorporated by this reference.
- 3. Exhibit B, Budget Detail and Payment Provisions, 1. Payments, item A is deleted in its entirety and replaced with Exhibit B.1. A. to read as follows:
 - "A. The State shall issue one working capital advance to Contractor in an amount equal to 25 percent of the total consideration set forth on Std. 213, item 3. of this Agreement. Subsequent bimonthly payments shall be made based on actual expenditure reports being submitted timely as indicated in Exhibit B, Section 2. Reporting Requirements, of this Agreement." (Refer to original Agreement.)
- 4. Exhibit B, Budget Detail and Payment Provisions, 2. Reporting Requirements, A. item 1) Bimonthly Reports, is deleted in its entirety and replaced with Exhibit B, 2. A. 1) to read as follows:

"1) Bimonthly Reports

"Contractor shall complete and submit to the State, on the current, appropriate CSD forms, a bimonthly Fiscal Expenditure Report/CSD Fiscal Data - Program Support Cost Report (CSD 425.ER). Contractor shall ensure that the reports with original signature are received by the State on or before the fifteenth (15th) calendar day following the reporting period, irrespective of the level of activity or amount of expenditure in the preceding two-month period. Due dates for bimonthly reports to CSD are as follows:

"Bimonthly Report Period	Report Due Dates
"January-February 2004	March 15, 2004
March-April 2004	May 15, 2004
May-June 2004	July 15, 2004
July-August 2004	September 15, 2004
September-October 2004	November 15, 2004
November-December 2004	January 15, 2005
January-February 2005	March 15, 2005
March-April 2005	May 15, 2005
May-June 2005	July 15, 2005
July-August 2005	September 15, 2005
September-October 2005	November 15, 2005
November-December 2005	January 15, 2006"

5. Exhibit B, Budget Detail and Payment Provisions, 2. Reporting Requirements, A. item 2), Semiannual Reports, is deleted in its entirety and replaced with Exhibit B. 2. A. 2) to read as follows:

"2) Semiannual Reports

"Contractor shall complete and submit to the State on the current, appropriate CSD forms, the applicable:

- CSBG Programs Report, CSD 415 CPR
- Client Characteristic Report, CSD 295-CCR
- Semiannual Safety Net Client Contact Report, CSD 296-SNCC.

"Contractor shall ensure that the reports are received by the State no later than the fifteenth (15th) calendar day following the end of the report period, irrespective of the level of activity or amount of expenditure in the report period. The reports shall be submitted via e-mail to CSBGReports@csd.ca.gov. Due dates for semiannual reports to CSD are as follows:

"Semiannual Period	Report Due Date via e-mail	
"CSD 415		
January-June 2004	July 15, 2004	
January-December 2004	January 15, 2005	
January-June 2005	July 15, 2005	
January-December 2005	January 15, 2006	
"CSD 295 and CSD 296		
January-June 2004	July 15, 2004	
July-December 2004	January 15, 2005	
January-June 2005	July 15, 2005	
July-December 2005	January 15, 2006"	

- 6. Exhibit B, Budget Detail and Payment Provisions, 2. Reporting Requirements, A., 3) Community Services Block Grant Information System (CSBG/IS Annual Survey), is deleted in its entirety and replaced with Exhibit B, 2. A. 3) to read as follows:
 - **"3)** Community Services Block Grant Information System (CSBG/IS Annual Survey)

"Contractor shall complete and submit to the State on the current appropriate CSD forms the CSBG Fiscal Data—Other Funds (CSD 425.OF), CSBG Fiscal Data—Other Resources (CSD 425.OR), and the CSBG Program and Management Accomplishments (CSD 090). Contractor shall ensure that the completed reports are received by the State no later than the

first (1st) of March. The reports shall be submitted via e-mail to csbgis@csd.ca.gov. Due dates for the CSBG/IS Annual Survey are as follows:

"Contract Period Due Date

"January 1, 2004 through

December 31, 2004 March 1, 2005

"January 1, 2005 through

December 31, 2005 March 1, 2006"

7. Exhibit D, Special Terms and Conditions: A new item 9, Amendment for Change of Agency Name, is added to read:

"9. Amendment for Change of Agency Name

"An amendment is required to change the Contractor's name as listed on this Agreement. Upon receipt of legal documentation of the name change, the State will process the amendment. Legal documentation could include the certified filing from the Secretary of State for private, nonprofit agencies or approval by the governing body for public entities. Payment of invoices presented with a new name cannot be paid prior to approval of said amendment."

All other terms and conditions under this Agreement shall remain unchanged.

\Cobra\Shared\Contracts\Community Services Block Grant\2004 Community Services Block Grant\2004 05 CSBG Am. 1 3 9 04 Final.doc

ATTACHMENT I

CSBG FISCAL DATA

CSBG Contract Budget (Summary) CSD 425.S (Rev. 11/03)

-Personnel Costs CSD 425.1.1 (Rev. 11/03)

-Non Personnel Costs CSD 425.1.2 (Rev. 11/03)

DEPARTMENT OF COMMUNITY SERVICES AND DEVELOPMENT

700 North 10th Street, Room 258 Sacramento, CA 95814 (916) 341-4200 (916) 341-4203 (FAX) (916) 327-6318 (TDD)



December 15, 2003

To: CSBG Contractors

Subject: 2004 Community Services Block Grant (CSBG) Contract

As expected, Congress has not passed the 2004 Federal budget and CSBG is being partially funded by a Continuing Resolution. To ensure that there are no gaps in service delivery, the Department of Community Services and Development (CSD) will issue approximately one quarter of your 2003 contract allocation, based on the amount of funds CSD has received from the Federal government. The allocation will be amended once California receives its final grant award.

Enclosed are your 2004/05 CSBG contract, exhibits, and reporting forms. The two-year contract term will start January 1, 2004, and terminate on December 31, 2005. The contract exhibits and reporting forms can also be accessed via CSD's website at www.csd.ca.gov under "What's New."

Listed below is a summary of the changes implemented in the 2004/05 CSBG contract:

- Exhibit B, Budget Detail and Payment Provisions, 2., reflects the reporting requirements and dates for the two-year contract term.
- The quarterly programmatic outcome goals and objectives reporting requirement is deleted.
- Exhibit D, Special Terms and Conditions, 8., includes new internal control certification language.

If you have any questions regarding your 2004/05 CSBG contract, please contact your Field Representative.

Sincerely,

TIMOTHY DAYONOT Director

DEPARTMENT OF COMMUNITY SERVICES AND DEVELOPMENT

700 North 10th Street, Room 258 Sacramento, CA 95814 (916) 341-4200 (916) 341-4203 (FAX) (916) 327-6318 (TDD)



December 15, 2003

To All Community Services Block Grant Contractors:

2004/05 Community Services Block Grant Contract (CSBG)

Enclosed is your agency's contract packet for the 2004/05 Community Services Block Grant Program. It includes a table of contents, <u>two</u> complete copies of the contract (face sheet, exhibits, and attachments), and one set of the reporting forms to be used with the 2004/05 CSBG contract.

Please observe the following instructions, and feel free to use this letter as a checklist.

Submit a go	Submit a governing board resolution with an original signature of your board's authorized		
-	tive. The board's resolution must identify whom it has authorized to sign the 2004/05 ract and any amendments.		
and title of your agence authorized in	the person who is authorized to sign the contract. Print the date signed. Ensure that y's authorized representative has signed both face sheets . Your agency's representative is the person whom the governing board has specified in its resolution as representative to sign the 2004/05 CSBG contract and, if applicable, any amendments.		
The following exhibits are part of the contract packet. Please complete, sign, and return both copies with the contract packet.			
Exhibit A Exhibit B Exhibit C Exhibit D Exhibit E Exhibit F Exhibit G	SCOPE OF WORK BUDGET DETAIL AND PAYMENT PROVISIONS (ATTACHMENT I, CSBG FISCAL DATA) (ATTACHMENT II, CSBG PROGRAM REPORT) GENERAL TERMS AND CONDITIONS SPECIAL TERMS AND CONDITIONS ADDITIONAL PROVISIONS DEFINITIONS CERTIFICATION REGARDING LOBBYING/DISCLOSURE OF LOBBYING ACTIVITIES		
-	eturn the contract packet to CSD, please arrange all pages, including the face sheets, d all attachments, in the same order in which you received them. Include your board		

resolution, insurance and fidelity bond documents, advance request, and, if desired, a transmittal

letter, but do not staple or otherwise attach these documents to the contracts themselves.

2004/05 CSBG December 15, 2003 Page 2

☐ We have enclosed the programmatic and reporting forms that your agency must use to document and report activities and expenditures for the 2004/05 Community Services Block Grant Program Year. Please use these forms as masters, and duplicate them for the appropriate programmatic and fiscal staff at your agency.

Please return your completed amendment packet within 30 days (45 days for public agencies) to:

Contract Services Unit Department of Community Services and Development 700 North 10th Street, Room 258 Sacramento, CA 95814

Please keep in mind that in order for CSD to execute your contract, all of your agency's contract documents must be **complete**. Authorized persons must sign the board resolution, both face sheets, and applicable exhibits and attachments. Except as waived for self-insured governmental entities, the Certificate of Liability Insurance must name CSD as the Certificate Holder and as an additional insured, except for workers' compensation and fidelity bond. Insurance documents that are on file at CSD must be current or replaced. Coverage must include workers' compensation insurance, fidelity bond, general liability, and vehicle insurance.

If you have questions regarding the contracting process, you may contact Brenda Carradine of my staff at (916) 341-4262. For questions regarding contractual requirements, reporting forms, insurance coverage, or other requirements, please contact your Field Representative.

Sincerely,

Fernando Negrete Manager, Contract Services Unit

FN:BAC Enclosures



DEPARTMENT OF COMMUNITY SERVICES AND DEVELOPMENT

2004/05 COMMUNITY SERVICES BLOCK GRANT (CSBG)

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SCOPE OF WORK

1.	Contractor agrees to provide services and activities to eligible participants residing in
	the service area described in Exhibit A, Section 2., pursuant to Government Code
	Section 12725et seq., and 42 United States Code (USC) 9901 et seq., as amended, the
	Community Services Block Grant Act.

2. The services shall be performed in the following service area:

Send all correspondence and fiscal and programmatic reports to: 3.

> State Agency: Department of Community Services and Development

Section/Unit:

Field Operations 700 North 10th Street, Room 258 Address:

Sacramento, CA 95814

(916) 341-4200 Phone: (916) 327-3153 Fax:

\\Cobra\\Shared\\Contracts\\Community Services Block Grant\\2004 Community Services Block Grant\\Exhibit A, Scope of Work FOR PARC.doc

BUDGET DETAIL AND PAYMENT PROVISIONS

1. Payments

- A. The State shall issue one working capital advance to Contractor in an amount equal to **100** percent of the total consideration set forth on Std. 213, item 3. of this Agreement. Subsequent bimonthly payments shall be made based on actual expenditure reports being submitted timely as indicated in Exhibit B, Section 2. Reporting Requirements, of this Agreement.
- B. Contractor shall insure that the required agency-wide audit be submitted timely, corrective action plans are adhered to, CSD receivables are submitted timely, and/or that repayment schedules are met and adhered to, or CSD shall withhold advance or subsequent payments.
- C. In the event this Agreement is amended to increase the consideration of this Agreement, a subsequent advance payment not to exceed 25 percent of the increased amount may be authorized by the State. A subsequent advance payment plus any pervious advances allowed shall not exceed 25 percent of the total consideration of this Agreement.

D. Budget Contingency Clause

- 1) It is mutually agreed that if the Budget Act of the current year and/or any subsequent years covered under this Agreement does not appropriate sufficient funds for the program, this Agreement shall be of no further force and effect. In this event, the State shall have no liability to pay any funds whatsoever to Contractor or to furnish any other considerations under this Agreement and Contractor shall not be obligated to perform any provisions of this Agreement.
- 2) If funding for any fiscal year is reduced or deleted by the Budget Act for purposes of this program, the State shall have the option to either cancel this Agreement with no liability occurring to the State, or offer an agreement amendment to Contractor to reflect the reduced amount.

2. Reporting Requirements

A. The issuance of other CSD contracts, to include reimbursement payments, to the Contractor shall be contingent upon timely receipt of the required reports of this Agreement.

1) **Bimonthly Reports**

Contractor shall complete and submit to the State, on the current, appropriate CSD forms, a bimonthly Fiscal Expenditure Report/CSD Fiscal Data - Program Support Cost Report (CSD 425.ER). Contractor shall ensure that the reports with original signature are received by the State on or before the fifteenth (15th) calendar day following the reporting period, irrespective of the level of activity or amount of expenditure in the preceding two-month period. Due dates for bimonthly reports to CSD are as follows:

Bimonthly Report Period	Report Due Dates
January-February 2004	March 15, 2004
March-April 2004	May 15, 2004
May-June 2004	July 15, 2004
July-August 2004	September 15, 2004
September-October 2004	November 15, 2004
November-December 2004	January 15, 2005
January-February 2005	March 15, 2005
March-April 2005	May 15, 2005
May-June 2005	July 15, 2005
July-August 2005	September 15, 2005
September-October 2005	November 15, 2005
November-December 2005	January 15, 2006

2) Semiannual Reports

Contractor shall complete and submit to the State on the current, appropriate CSD forms, the applicable:

- CSBG Programs Report, CSD 415 CPR
- Client Characteristic Report, CSD 295-CCR
- Semiannual Safety Net Client Contact Report, CSD 296-SNCC.

Contractor shall ensure that the reports are received by the State no later than the fifteenth (15th) calendar day following each six-month report period, irrespective of the level of activity or amount of expenditure in the preceding six-month period. Due dates for semiannual reports to CSD are as follows:

Report Due Date via e-mail
July 15, 2004
January 15, 2005
July 15, 2005
January 15, 2006
July 15, 2004
January 15, 2005
July 15, 2005
January 15, 2006

3) Community Services Block Grant Information System (CSBG/IS Annual Survey)

Contractor shall complete and submit to the State on the current appropriate CSD forms the CSBG Fiscal Data—Other Funds (CSD 425.OF), CSBG Fiscal Data—Other Resources (CSD 425.OR), and the CSBG Program and Management Accomplishments (CSD 090). Contractor shall ensure that the completed reports are received by the State no later than the first (1st) of March following the contract term. The due date for the CSBG/IS Annual Survey is:

Contract Period	<u>Due Date</u>	
January 1, 2004 through December 31, 2004	March 1, 2005	
January 1, 2005 through December 31, 2005	March 1, 2006	

B. Close-out Report

Contractor shall submit, on the appropriate CSD forms, financial and programmatic close-out reports to the State within ninety (90) calendar days after expiration of this Agreement. Final reimbursement to Contractor, if owed, shall be contingent upon timely receipt of this closeout by the State. Subsequent payments for CSBG or other CSD contracts shall be contingent upon timely receipt of the closeout of this Agreement. The issuance of other CSD contracts, to include reimbursement to the Contractor, shall be contingent upon timely receipt of the closeout of this Agreement. Close-out reports are subject to final review by CSD's Audit Services Unit.

C. Review

- 1) The State shall review Contractor's program operations reports and evaluate Contractor's demonstrated ability to effectively utilize all funds available under this Agreement and meet outcome goals and measures.
- 2) An amendment to the total consideration of this Agreement may occur as a result of the State's review of Contractor's program and fiscal operations.

3. <u>Budget and Work Plan</u>

- A. Prior to execution of this Agreement by the State, Contractor shall submit to the State Attachment I, CSBG Fiscal Data Series. Contractor shall also submit to the State Attachment II, CSBG Program Report, which shall reflect a description of outcome measures to be used to monitor success in promoting family development, agency development and community development, measurable goals, objectives, and available resources for the delivery of services throughout the program period.
- B. With the exception of out-of-state travel costs, Contractor may exceed budget line items by more than ten (10%) percent. Expenditures may exceed budgeted line item amounts with equal decreases in other line items. Changes in line item amounts may not result in any increase in the total reimbursements. This provision does not alter the requirement of Exhibit B, Section 3. C. below pertaining to the twelve percent (12%) administration limitation, nor does it alter Exhibit E, Section 5. C. requiring prior approval for the purchase of equipment or vehicles. Expenditures in excess of the budget total shall not be reimbursed by CSD. In all other circumstances, pursuant to Exhibit E, Section 4. A., prior CSD approval of a properly completed Justification for Contract Amendment/Modification, CSD 425b, shall be required.
- C. For the purpose of administrative expenditures, Contractor shall use funds allocated under this Agreement in an amount not to exceed twelve percent (12%) of its total operating funds.
- D. Contractor shall not use funds provided under this Agreement to cover administrative costs incurred in the Low-Income Home Energy Assistance Program (LIHEAP) in excess of the LIHEAP contractual limitations.

4. <u>Schedule of Attachments</u>

The following attachments to this exhibit are hereby incorporated by this reference.

Attachment I	CSBG FISCAL DATA

CSBG Contract Budget (Summary)	CSD 425.S	(Rev. 11/03)
Budget Support	CSD 425.1.1	(Rev. 11/03)
	CSD 425.1.2	(Rev. 11/03)

Attachment II CSBG PROGRAM DATA

CSBG Program Report CSD 415 (New 01/03)

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ATTACHMENT I

CSBG FISCAL DATA

CSBG Contract Budget (Summary)	CSD 425.S	(Rev. 11/03)
Budget Support	CSD 425.1.1	(Rev. 11/03)
	CSD 425.1.2	(Rev. 11/03)

(New 01/03)

EXHIBIT B (Standard Agreement)

ATTACHMENT II

CSBG PROGRAM DATA

CSBG Program Report CSD 415

GENERAL TERMS AND CONDITIONS

1. Approval

This Agreement shall become a valid, enforceable agreement only after both parties sign it.

2. Amendment

No amendment or variation of the terms of this Agreement shall be valid unless made in writing, signed by the parties, and approved as required. No oral understanding or Agreement not incorporated in the Agreement is binding on any of the parties.

3. Assignment

This Agreement is not assignable by the Contractor, either in whole or in part, without the consent of the State in the form of a formal written amendment.

4. Audit

Contractor agrees that the awarding department, the Department of General Services, the Bureau of State Audits, or their designated representative shall have the right to review and to copy any records and supporting documentation pertaining to the performance of this Agreement. Contractor agrees to maintain such records for possible audit for a minimum of three (3) years after final payment, unless a longer period of records retention is stipulated. Contractor agrees to allow the auditor(s) access to such records during normal business hours and to allow interviews of any employees who might reasonably have information related to such records. Further, Contractor agrees to include a similar right of the State to audit records and interview staff in any subcontract related to performance of this Agreement. (Government Code Section 8546.7, Public Contract Code Section 10115 et seq., California Code of Regulations Title 2, Section 1896)

5. Indemnification

Contractor agrees to indemnify, defend, and save harmless the State, its officers, agents, and employees from any and all claims and losses accruing or resulting to any and all contractors, subcontractors, suppliers, laborers, and any other person, firm, or corporation furnishing or supplying work services, materials, or supplies in connection with the performance of this Agreement, and from any and all claims and losses accruing or resulting to any person, firm, or corporation who may be injured or damaged by Contractor in the performance of this Agreement.

6. Disputes

Contractor shall continue with the responsibilities under this Agreement during any dispute.

7. <u>Independent Contractor</u>

Contractor, and the agents and employees of Contractor, in the performance of this Agreement, shall act in an independent capacity and not as officers or employees or agents of the State.

8. Nondiscrimination Clause

During the performance of this Agreement, Contractor and its subcontractors shall not unlawfully discriminate, harass, or allow harassment against any employee or applicant for employment because of sex, race, color, ancestry, religious creed, national origin, physical disability (including HIV and AIDS), mental disability, medical condition (cancer), age (over 40), marital status, and denial of family care leave. Contractor and subcontractors shall insure that the evaluation and treatment of their employees and applicants for employment are free from such discrimination and harassment. Contractor and subcontractors shall comply with the provisions of the Fair Employment and Housing Act (Government Code Section 12990 (a-f) et seq.) and the applicable regulations promulgated thereunder (California Code of Regulations, Title 2, Section 7285 et seq.). The applicable regulations of the Fair Employment and Housing Commission implementing Government Code Section 12990 (a-f), set forth in Chapter 5 of Division 4 of Title 2 of the California Code of Regulations, are incorporated into this Agreement by reference and made a part hereof as if set forth in full. Contractor and its subcontractors shall give written notice of their obligations under this clause to labor organizations with which they have a collective bargaining or other Agreement.

Contractor shall include the nondiscrimination and compliance provisions of this clause in all subcontracts to perform work under the Agreement.

9. Timeliness

Time is of the essence in this Agreement.

10. <u>Compensation</u>

The consideration to be paid Contractor, as provided herein, shall be in compensation for all of Contractor's expenses incurred in the performance hereof, including travel, per diem, and taxes, unless otherwise expressly so provided.

11. <u>Governing Law</u>

This contract is governed by and shall be interpreted in accordance with the laws of the State of California.

12. <u>Child Support Compliance Act</u>

For any Agreement in excess of \$100,000, the Contractor acknowledges in accordance with, that:

- a) Contractor recognizes the importance of child and family support obligations and shall fully comply with all applicable state and federal laws relating to child and family support enforcement, including, but not limited to, disclosure of information and compliance with earnings assignment orders, as provided in Chapter 8 (commencing with section 5200) of Part 5 of Division 9 of the Family Code; and
- b) Contractor, to the best of its knowledge is fully complying with the earnings assignment orders of all employees and is providing the names of all new employees to the New Hire Registry maintained by the California Employment Development Department.

13. Unenforceable Provision

In the event that any provision of this Agreement is unenforceable or held to be unenforceable, then the parties agree that all other provisions of this Agreement have force and effect and shall not be affected thereby.

14. <u>Computer Software</u>

Contractor certifies that it has appropriate systems and controls in place to ensure that State funds will not be used in the performance of this Agreement for the acquisition, operation, or maintenance of computer software in violation of copyright laws.

15. Union Organizing

For all contracts, except fixed price contracts of \$50,000 or less, the Contractor acknowledges that:

By signing this agreement Contractor hereby acknowledges the applicability of Government Code Section 16645 through Section 16649 to this Agreement and agrees to the following:

- a) Contractor will not assist, promote or deter union organizing by employees performing work on a state service contract, including a public works contract.
- b) No state funds received under this Agreement will be used to assist, promote or deter union organizing.

- c) Contractor will not, for any business conducted under this Agreement, use any state property to hold meetings with employees or supervisors, if the purpose of such meetings is to assist, promote or deter union organizing, unless the state property is equally available to the general public for holding meetings.
- d) If Contractor incurs costs, or makes expenditures to assist, promote or deter union organizing, Contractor will maintain records sufficient to show that no reimbursement from state funds has been sought for these costs, and that Contractor shall provide those records to the Attorney General upon request.

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SPECIAL TERMS AND CONDITIONS

1. <u>Travel and Per Diem</u>

- A. Contractor's total travel for in-state and/or out-of-state and per diem costs shall be included in the contract Budget(s). Out-of-state travel costs that exceed the budgeted amount shall not be reimbursed without prior written authorization from CSD.
- B. Contractor's administrative-related travel and per diem reimbursement costs shall be reimbursed based on the Contractor's policies and procedures.
- C. Contractor's programmatic-related travel costs and per diem reimbursement rates shall not exceed the amounts established by the State Department of Personnel Administration Rules and Regulations, Section 599.619, dated July 1, 1997, and as amended from time to time

2. Conflict of Interest

- A. Contractor certifies that its employees and the officers of its governing body shall avoid any actual or potential conflicts of interest, and that no officer or employee who exercises any functions or responsibilities in connection with this Agreement shall have any personal financial interest or benefit that either directly or indirectly arises from this Agreement.
- B. Contractor shall establish safeguards in writing to prohibit its employees or its officers from using their positions for a purpose that could result in private gain or that gives the appearance of being motivated for private gain for themselves or others, particularly those with whom they have family, business, or other ties.

3. Insurance and Fidelity Bond

A. General Requirements

1) Third-Party Insurance

- a. By execution of this Agreement, Contractor agrees that the below-required insurance policies and bond shall be in effect at all times during the term of this Agreement.
- b. Contractor shall provide the State with written notice at least 30 calendar days prior to cancellation or reduction of insurance coverage to an amount less than that required in this Agreement.
- c. In the event said insurance coverage expires at any time or times during the term of this Agreement, Contractor agrees to provide at

least 30 calendar days prior to said expiration date a new Certificate of Insurance (ACORD 25) evidencing insurance coverage as provided for herein for not less than the remainder of the term of this Agreement. The Certificate of Insurance (ACORD 25) shall identify and name the State as the Certificate Holder.

- d. New Certificates of Insurance are subject to review for content and form by CSD.
- e. In the event Contractor fails to keep in effect at all times the specified insurance and bond coverage as herein provided, the State may, in addition to any other remedies it may have, suspend this Agreement.
- f. With the exception of workers' compensation and fidelity bond, the State shall be named as additional insured on all certificates of insurance required under this Agreement.
- g. The issuance of other CSD contracts, to include any cash advances, and reimbursement payments, to the Contractor shall be contingent upon required current insurance coverage being on file at CSD for this Agreement.

2) Self-Insurance

- a. When Contractor is a self-insured governmental entity, the State, upon satisfactory proof, may waive the appropriate insurance requirements upon written certification. An appropriate county or city risk manager shall sign this certification that shall contain assurance of the adequacy of the governmental entity's ability to cover any potential losses under this Agreement.
- b. Contractor shall specify in writing a list of which coverage(s) will be self-insured under this Agreement and shall list all applicable policy numbers, expiration dates, and coverage amount.
- c. Should Contractor utilize a subcontractor(s) to provide services under this Agreement, Contractor shall indemnify and hold the State harmless against any liability incurred by that subcontractor(s).

B. Workers' Compensation Insurance

- 1) Contractor shall have and maintain for the term of this Agreement workers' compensation insurance issued by an insurance carrier licensed to underwrite workers' compensation insurance in the State of California.
- 2) Contractor shall submit either an applicable Certificate of Insurance (ACORD 25) or a Certificate of Consent to Self-Insure issued by the Director of the Department of Industrial Relations to the State as evidence of compliance with the workers' compensation insurance requirement prior to issuance of an initial cash advance.

C. Fidelity Bond

- Contractor shall maintain a fidelity bond in the minimum amount of four percent of the total amount of consideration set forth under this Agreement.
- 2) Contractor shall submit an applicable Certificate of Insurance (ACORD 25) to the State as evidence of compliance with the fidelity bond requirement prior to issuance of an initial cash advance.

D. General Liability Insurance

- 1) Contractor shall have and maintain for the term of this Agreement general liability and property damage insurance for a combined single limit of not less than \$500,000 per occurrence.
- 2) Contractor shall submit an applicable Certificate of Insurance (ACORD 25), naming CSD as an additional insured, to the State as evidence of compliance with general liability insurance requirements prior to issuance of an initial cash advance.

E. Vehicle Insurance

- 1) Contractor shall have and maintain for the term of this Agreement vehicle insurance in the amount of \$500,000 for each person and each accident for bodily injury and in the amount of \$500,000 for each person and each accident for property damage.
- When employees use their own vehicles to perform duties within the scope of their employment, Contractor shall have and maintain for the term of this Agreement nonowned and hired-auto liability insurance in the amount of \$500,000 for each person and each accident for bodily injury and \$500,000 for each person and each accident for property damage. (Driving to and from work is not within the scope of employment.)

3) Contractor shall submit an applicable Certificate of Insurance (ACORD 25), designating CSD as an additional insured, to the State as evidence of compliance with said vehicle insurance requirements prior to issuance of an initial cash advance.

4. Subcontracts

Contractor may enter into subcontract(s) to perform the provisions of this Agreement.

- A. Prior to the commencement of subcontracted services under this Agreement, Contractor shall obtain board approval, to include but not be limited to, an assurance that the subcontractor agreement(s) shall comply with all terms, conditions, assurances, and certifications of this Agreement for the nonprofit and local governmental agencies performing services in the area(s) described in Exhibit A, Section 2.
- B. Contractor shall provide written notification to the State within 60 calendar days of execution of each subcontractor agreement the name of the subcontractor entity, its address, telephone number, contact person, contract amount, and program description of each subcontractor activity to be performed under this Agreement.
- C. Contractor shall immediately notify all of its subcontractor(s) in writing within five days of such action in the event the State suspends, terminates, and/or makes changes to the services to be performed under this Agreement.
- D. Contractor is the responsible party and shall remain liable for the performance of the terms, conditions, assurances, and certifications of this Agreement, without recourse to the State, regarding the settlement and satisfaction of all contractual and administrative issues arising out of subcontract agreement(s) entered into in support of this Agreement, including disputes, claims, or other matters of a contractual nature as well as civil liability arising out of negligence or intentional misconduct of the subcontract(s).
- E. Nothing contained in this Agreement or otherwise shall create any contractual relation between the State and any subcontractors, and no subcontract shall relieve the Contractor of its responsibilities and obligations hereunder. Contractor agrees to be as fully responsible to the State for the acts and omissions of its subcontractors and of persons either directly or indirectly employed by any of them as it is for the acts and omissions of persons directly employed by the Contractor. The Contractor's obligation to pay its subcontractors is an independent obligation from the State's obligation to make payments to the Contractor. As a result, the State shall have no obligation to pay or to enforce the payment of any moneys to any subcontractor.

5. Governing Board Resolution

Contractor assures that its governing body has adopted and passed a resolution specific to this Agreement that shall be forwarded to the State and that includes, at a minimum, the following provisions:

- A. Authorization for the submittal to the State of this Agreement, including all exhibits and assurances contained herein;
- B. The name and original signature of the chairperson of the board; the date signed by the chairperson; and, if applicable, the date the resolution was ratified by the board of directors;
- C. Authorization to and identification of the person/position certified as the official representative of the governing board to sign and enter into this Agreement;
- D. Identification of the contract number and program; and
- E. Authorization to and identification of the person certified as the official representative of the governing board to enter into and accept any amendments to this Agreement and revisions to exhibits.

6. National Labor Relations Board Certification

Contractor certifies that no more than one (1) final unappealable finding of contempt of court by a Federal court has been issued against Contractor within the immediately preceding two-year period because of Contractor's failure to comply with an order of a Federal court, which orders Contractor to comply with an order of the National Labor Relations Board. (PCC 10296) (Not applicable to public entities.)

7. Drug-Free Workplace Requirements

Contractor will comply with the requirements of the Drug-Free Workplace Act of 1990 and will provide a drug-free workplace by taking the following actions:

- A. Publish a statement notifying employees that unlawful manufacture, distribution, dispensation, possession or use of a controlled substance is prohibited and specifying actions to be taken against employees for violations.
- B. Establish a Drug-Free Awareness Program to inform employees about:
 - 1) The dangers of drug abuse in the workplace;
 - 2) The person's or organization's policy of maintaining a drug-free workplace;

- 3) Any available counseling, rehabilitation and employee assistance programs; and,
- 4) Penalties that may be imposed upon employees for drug abuse violations.
- C. Every employee who works on the proposed Agreement will:
 - 1) Receive a copy of the company's drug-free workplace policy statement; and,
 - 2) Agree to abide by the terms of the company's statement as a condition of employment on the Agreement.

Failure to comply with these requirements may result in suspension of payments under the Agreement or termination of the Agreement or both and Contractor may be ineligible for award of any future State agreements if the department determines that any of the following has occurred: (1) the Contractor has made false certification, or (2) violated the certification by failing to carry out the requirements as noted above. (GC 8350 et seq.)

8. Internal Control Certification

Contractor shall ensure the establishment and maintenance of a system of internal accounting and administrative control. This responsibility includes documenting the system, communicating system requirements to employees, and assuring that the system is functioning as prescribed and is modified, as appropriate, for changes in conditions.

The system of internal accounting and administrative control shall include:

- A. Segregation of duties appropriate to safeguard state assets.
- B. Limited access to agency assets to authorized personnel who require these assets in the performance of their assigned duties.
- C. Authorization and recordkeeping procedures adequate to provide effective accounting controls over assets, liabilities, revenues, and expenditures.
- D. Practices to be followed in performance of duties and functions.
- E. Personnel of a quality commensurate with their responsibilities.
- F. Effective internal reviews.

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ADDITIONAL PROVISIONS

- 1. <u>Limitation on Use of Funds (1998 CSBG Reauthorization Act, Section 678F)</u>
 - A. Contractor shall assure that funds received under this Agreement shall not be used to replace discontinued state or local funding. Unless waived by the U.S. Department of Health and Human Services. Contractor shall assure that funds received under this Agreement shall not be used for the purchase or improvement of land or for the purchase, construction, or permanent improvement of any building or other facility. Funds other than administration may be used for low-cost weatherization or energy-related home repairs.
 - B. Contractor shall assure that funds provided under this Agreement shall not be transferred to any other local, state, or federal government program.
 - C. Contractor shall assure that programs assisted with CSBG funds shall not be carried on in a manner involving the use of program funds, the provision of services, or the employment or assignment of personnel, in a manner supporting or resulting in the identification of such programs with:
 - 1) Any partisan or nonpartisan political activity or any political activity associated with a candidate, or contending faction or group, in an election for public or party office;
 - 2) Any activity to provide voters or prospective voters with transportation to the polls or similar assistance in connection with any such election; or
 - 3) Any voter registration activity.
 - D. Contractor assures that employees of any entity that receives CSBG funds will not:
 - 1) Use their official authority or influence to interfere with or affect the result of an election or a nomination for office; or
 - 2) Coerce, command, or advise a state or local officer or employee, or another employee of a CSBG-funded entity to pay, lend, or contribute anything of value to any person or entity (including a political party) for political purposes.
 - E. Contractor shall refrain from all lobbying activities if such activities involve the use of any funds that are the subject of this Agreement or any other funds, programs, projects, or activities that flow from this Agreement.

F. If Contractor engages in lobbying activities, Contractor shall complete and sign and date the Certification Regarding Lobbying/Disclosure of Lobbying Activities, Exhibit G, required by the U.S. Department of Health and Human Services under 45 CFR Part 93.

2. Audit Reports

- A. Funds provided under this Agreement shall be included in an audit conducted in accordance with the provisions of OMB Circular A-133 for nonprofit and public agencies, standards promulgated by the American Institute of Certified Public Accountants (AICPA), and those standards included in "Government Auditing Standards, 1994 Revision, as amended."
- B. The financial and compliance audit shall contain the following supplementary financial information: A combining statement of revenue and expenditures for each contract which presents, by budget line item, revenue and expenditures for the contract or audit period.
- C. Private, nonprofit contractors shall submit to CSD two copies of the required audit report within six months of the end of the Contractor's fiscal year. Upon written request by the Contractor's CPA, which includes an explanation of why the audit cannot be submitted within six months of the end of the Contractor's fiscal year, an extension may be granted by CSD Audit Services Unit for submittal of the audit report not to exceed an additional 30 calendar days from the original due date. The audit reports are to be submitted to the following address:

Department of Community Services and Development Attention: Audit Services Unit 700 North 10th Street, Room 258 Sacramento, CA 95814

D. Local governmental entities shall submit to CSD two copies of the required audit report within 30 calendar days after the completion of the audit, but no later than nine months after the end of the audit period. The audit reports are to be submitted to the address stated in Exhibit E, Section 2.C. above.

Local governmental agencies also shall submit the required number of copies of the audit report in accordance with the guidelines set by the Division of Audits of the State Controller's Office. Said reports are to be submitted to the following address:

State Controller's Office Division of Audits 300 Capitol Mall, Fifth Floor Sacramento, CA 95814

E. Where services or funds under this Agreement are provided to, for, or by a wholly owned, or wholly controlled subsidiary of Contractor, Contractor hereby provides assurance that an audit shall be performed of this subsidiary organization in accordance with this section. Said required audit report shall be made available to the State upon request.

3. <u>Corrective Action, Termination, and Reduction of Funding</u>

- A. If Contractor has failed to comply with the material terms of this Agreement, the State shall:
 - 1) Inform the Contractor of the deficiency to be corrected;
 - 2) Require the Contractor to correct the deficiency;
 - 3) Offer technical assistance to help correct the deficiency, if appropriate; and
 - 4) Allow the Contractor to develop and implement, within 60 days after being informed of the deficiency, a quality improvement plan to correct the deficiency within a reasonable period of time, as determined by the State.
- B. Not later than 30 days after receiving from Contractor a proposed quality improvement plan, the State shall either approve such proposed plan or specify the reasons why the proposed plan cannot be approved.
- C. After providing adequate notice and an opportunity for a hearing, the State shall initiate proceedings to terminate the designation of or reduce the funding of Contractor unless Contractor corrects the deficiency.
- D. A determination to terminate the designation or reduce the funding of Contractor is reviewable by the Secretary of the U.S. Department of Health and Human Services.
- E. Contractor may terminate this Agreement at any time prior to its date of expiration upon 30 calendar days' notice to the other party. Such notice shall be delivered to the other party in writing, stating the reason for termination and the effective date thereof.
- F. Upon termination of this Agreement, the State, unless granted in writing, shall not pay Contractor for any obligations incurred after the effective date of such termination.

4. Amendment/Modification

No amendment or variation of the terms of this Agreement shall be valid unless made in writing, signed by the parties and approved as required. No oral understanding or Agreement not incorporated in the Agreement is binding on any of the parties. Exceptions to this requirement are line-item changes to the contract budget that do not affect the maximum amount payable under the contract or the work to be performed (see Exhibit B, Section 3.B.), and the exceptions provided for in Exhibit E, Section 8., Provisions for Federally Funded Grants. CSD 425b, Justification for Contract Amendment/Modification, is provided by CSD upon Contractor's request to submit changes to Attachment I or Attachment II.

- A. If a Contractor intends to request a contract modification to modify Attachment I or Attachment II, justification shall be submitted on CSD 425b, Justification for Contract Amendment/Modification, no later than 45 calendar days prior to the expiration date of this Agreement.
- B. Conference Report H.R. 3019, which became law in the 1996 federal appropriations legislation (Public Law 104-134), mandates that payments distributed by states to eligible entities under the CSBG Act, and not expended by such entity, must remain with such entity for carry-over into the next fiscal year for expenditure by such entity consistent with program purposes. See Exhibit E, Section 4.C. enacted below, for the exception to this provision. In order to facilitate this requirement in a timely manner, Contractor must request a contract extension no later than 45 calendar days prior to the end of the term of this Agreement. If the extension exceeds 60 calendar days and/or carry-over funds exceed 10 percent of the total contract amount, Contractor shall submit a revised Attachment I, CSBG Fiscal Data, and Attachment II, CSBG Program Report. In order to facilitate the timely execution of an amendment to extend the term of this Agreement, Contractor should make a request no later than 45 calendar days prior to the end of the term of this Agreement. Carry-over funds must be spent prior to expending new contract dollars.
- C. For unobligated funds exceeding 20 percent of the total contract amount, the State may recapture and redistribute the funds. The State shall redistribute such funds to an eligible entity or require the Contractor to redistribute the funds to a private, nonprofit organization, located within the community served by Contractor, for activities consistent with the purpose of this contract. This provision is provided for in Section 675C(a)(3)(A) of the 1998 CSBG Reauthorization Act.

5. Contractor Assurances and Certifications

- A. Contractor certifies that it possesses legal authority to apply to the State for grants funded under the California Community Services Block Grant Program Act and the Federal Community Services Block Grant Act.
- B. Contractor assures that its governing board has adopted bylaws in accordance with the 1998 CSBG Reauthorization Act, Section 676B, and that such bylaws must assure that the board fully participates in the development, planning, implementation, and evaluation of the program to serve low-income communities.
- C. Contractor assures that all supplies, materials, equipment, or services purchased with funds provided by this Agreement shall be used solely for the activities allowed under this Agreement, unless a fair market value for such use is charged to the benefiting program and credited to this Agreement.
 - Contractor shall adhere to its established policies and procedures regarding the purchase or lease of equipment having a per-unit cost of five thousand dollars (\$5,000) or more. Policies and procedures shall be in conformance with OMB requirements contained in the following Circulars: A-102, Subpart C, or A-110 and approved by the Board of Directors. Noncompliance shall result in a disallowance of purchase/lease item(s). Contractor shall include the type and cost of equipment or material to be purchased or leased on the "Equipment" line item of the budget. Contractor shall prepare and submit a Request for Purchase/Lease Approval, CSD 558, to CSD prior to commencing purchasing/leasing activities
- D. Contractor assures that it shall exercise due care in the use, maintenance, protection, and preservation of State-owned property in Contractor's possession or any other property purchased by Contractor with State funds. Such care shall include, but is not limited to, the following:
 - 1) Maintaining insurance coverage against loss or damage to such property; and
 - 2) Ensuring that the legal ownership of any motor vehicle or trailer is in the name of the Contractor, not CSD.
- E. Contractor assures that it shall be in compliance with Federal and State Occupational Safety and Health Statutes, the California Safe Drinking Water and Toxic Enforcement Act of 1986, and Workers' Compensation laws.
- F. Contractor assures that it shall coordinate its plans and activities with other Community Services Block Grant contractors who serve any part of Contractor's service area, so that funds provided under this Agreement are not used to duplicate particular services to the same beneficiaries.

- G. Contractor's plans and policies affecting all other Community Services Block Grant contractors shall be equitable and beneficial to all such contractors and the population they serve.
- H. Federal Certification Regarding Debarment, Suspension, and Related Matters

Contractor hereby certifies to the best of its knowledge that it or any of its officers:

- 1) Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency;
- 2) Have not within a three-year period preceding this Agreement been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (federal, state, or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
- Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (federal, state, or local) with commission of any of the offenses enumerated in paragraph 2 of this certification; and
- 4) Have not within a three-year period preceding this Agreement had one or more public (federal, state, or local) transactions terminated for cause or default.

I. Pro-Children Act of 1994

Contractor must comply with Public Law 103-227, Part C - Environmental Tobacco Smoke, also known as the Pro-Children Act of 1994 (Act). This Act requires that smoking not be permitted in any portion of any indoor facility owned or leased or contracted by an entity and used routinely or regularly for the provision of health, day care, education, or library services to children under the age of 18, if the services are funded by Federal programs either directly or through State and local governments. Federal programs include grants, cooperative Agreements, loans or loan guarantees, and contracts. The law does not apply to children's services provided in private residences, facilities funded solely by Medicare or Medicaid funds, and portions of facilities used for inpatient drug and alcohol treatment.

Contractor further agrees that the above language will be included in any subcontracts that contain provisions for children's services and that all subcontractors shall certify compliance accordingly.

J. American-Made Equipment/Products

Contractor shall assure, pursuant to Public Law 103-333, Section 507, to the extent practicable, that all equipment and products purchased with funds made available under this Agreement shall be American made.

K. Contract Administration

Contractors shall administer this Agreement in accordance with OMB requirements contained in the following Circulars: A-102, Subpart C for public agencies or A-110 for nonprofit organizations.

L. Child Support Services and Referrals (Section 675G(B) 1998 CSBG Reauthorization Act)

Contractor assures that it shall inform custodial parents in single-parent homes who participate in CSBG-funded programs about the availability of child-support services and refer them to the child-support offices of State and local government.

6. <u>Compliance with Rules and Regulations</u>

Activities of Contractor with respect to this Agreement shall be conducted in accordance with pertinent Federal and State rules and regulations, including relevant Office of Management and Budget (OMB) circulars and amendments thereto.

7. <u>Record-Keeping Responsibilities</u>

- A. All records maintained by Contractor shall meet the OMB requirements contained in the following Circulars: A-102 (Uniform Administrative Requirements for Grants and Cooperative Agreements to State and Local Governments) or A-110, Subpart C, Nonprofit Organizations, whichever is applicable.
- B. Contractor shall maintain all records pertaining to this Agreement for a minimum period of three years after submission of the Final Report of Expenditures. However, Contractor shall maintain all such records until resolution of all audit and monitoring findings are completed.
- C. Contractor shall make available appropriate books, documents, papers, and records to the Federal Government, the State, or any of their duly authorized representatives for examination, copying, or mechanical reproduction, on or off the premises of the appropriate entity upon a reasonable request therefor.

- D. Contractor assures that employee and applicant records shall be maintained in a confidential manner to assure compliance with the Information Practices Act of 1977, as amended, and the Federal Privacy Act of 1974, as amended.
- E. Upon request from CSD Contractor shall submit a certificate prepared by an independent accountant stating that Contractor's accounting system and internal controls are adequate to record and safeguard the assets entrusted to Contractor.

8. <u>Provisions for Federally Funded Grants</u>

- A. It is mutually understood that this Agreement may have been written before ascertaining the availability of Congressional appropriation of funds, for the mutual benefit of both Parties, in order to avoid program and fiscal delays that would occur if this Agreement were executed after that determination was made.
- B. This Agreement is valid and enforceable only if sufficient funds are made available to the State by the United States Government for the purposes of this Program. In addition, this Agreement is subject to any additional restrictions, limitations, or conditions enacted by the Congress or any statute enacted by the Congress that may affect the provisions, terms, or funding of this Agreement in any manner.
- C. It is mutually agreed that if the Congress does not appropriate sufficient funds for this Program, this Agreement shall be amended to reflect any such reduction in funds.
- D. The State has the option to invalidate this Agreement under the 30-day cancellation clause or to amend this Agreement to reflect any such reduction in funds.

9. Right to Monitor, Audit, and Investigate

- A. Any duly authorized representative of the Federal or State government, which includes but is not limited to the State Auditor, shall have the right to monitor and audit Contractor and all subcontractors providing services under this Agreement through on-site inspections, audits, and other applicable means the State determines necessary.
- B. Any duly authorized representative of the Federal or State government shall have the right to undertake investigations in accordance with Section 42 USC 9908 et seq., as amended.
- C. All Agreements entered into by Contractor with audit firms for purposes of conducting independent audits under this Agreement shall contain a clause

permitting any duly authorized representative of the State or Federal government access to the working papers of said audit firm(s).

10. <u>Nondiscrimination Compliance</u>

Contractor hereby certifies compliance with the following:

- A. Contractor hereby certifies compliance with the following:
 - 1) Federal Executive Order 11246, as amended by Executive Order 11375, relating to equal employment opportunity.
 - 2) Title VI and Title VII of the Civil Rights Act of 1964, as amended.
 - 3) Rehabilitation Act of 1973, as amended.
 - 4) Vietnam Era Veterans Readjustment Assistance Act of 1972, as amended.
 - 5) Title 41, Code of Federal Regulations (CFR), Chapter 60, Office of Federal Contract Compliance Programs, Equal Employment Opportunity, Department of Labor, as amended.
 - 6) Public Law 101-336, Americans with Disabilities Act of 1990.
- B. Contractor's signature affixed hereon shall constitute a certification that to the best of its ability and knowledge will, unless exempted, comply with the nondiscrimination program requirements set forth in this Section.

11. Affirmative Action Compliance

- A. Each Contractor or subcontractor with 50 or more employees and an Agreement of \$50,000 or more shall be required to develop a written Affirmative Action Compliance Program.
- B. The written program shall follow the guidelines set forth in Title 41 CFR Section 60-1.40, Sections 60-2.10 through 60-2.32, Sections 60-250.1 through 60-250.33, and Sections 60-741.4 through 60-741.32.
- C. Each Contractor or subcontractor with less than 50 employees shall comply with Section 202 of Part II of Executive Order 11246, as amended by Executive Order 11375. Contractor shall ensure that subcontractors falling within the scope of this provision shall comply in full with the requirements thereof.

12. Administrative Hearing for Denial of Client Benefits by Contractor

- A. Contractor has read and agrees to strictly comply with Title 22 of the California Code of Regulations, Section 100751, as amended, which sets forth elements to be included in client benefit denial appeal procedures and shall advise individuals who have been denied assistance of their 20-day right to appeal to the State.
- B. The client may withdraw request for appeal for administrative hearing at any time during the appeal process by rendering written or oral notice to the State. Where oral notice is given, such notice shall be confirmed in writing by the parties.

\Cobra\Shared\Contracts\Community Services Block Grant\2004 Community Services Block Grant\2003 CSBG Exhibit E PDS 12 05 03.doc

DEFINITIONS

1.	Authorized Agent:	The duly auth	norized represe	entative of the l	Board of Directors of
	TICOTICITE CONTINUE.				

Contractor and duly elected or appointed, qualified, and acting officer of the State. In the case of Contractor, the State shall be in receipt of board resolution affirming an agent's representative capacity to bind Contractor to the terms of this Agreement.

2. <u>Contractor</u>: The entity (partnership, corporation, association, agency, or

individual) designated on page 1 of this Agreement.

3. <u>CSD</u>: The Department of Community Services and Development, State

of California.

4. Parties: The State of California and the Contractor.

5. Subcontractor: An entity (partnership, corporation, association, agency, or

individual) that enters into a subcontract with Contractor to fulfill a

portion of the terms of this Agreement.

6. Subcontracts: Contracts entered into by and between Contractor and

subcontractor to carry out a portion of the purposes of this

Agreement.

7. The State: The State of California, Department of Community Services and

Development.

8. This Agreement: The complete contents of this contract entered into by and between

the State and Contractor, including all rights, duties, and

obligations whether expressed or implied required toward the legal

performance of the terms hereof.

9. This Program: The Community Services Block Grant (CSBG) Program,

42 USC 9901 et seq., as amended.

10. Amendment: A formal modification or change of a material term, such as the

term, cost, or scope of work, in one or more provisions of an

existing contract.

EXHIBIT G



CERTIFICATION REGARDING LOBBYING

DEPARTMENT OF HEALTH AND HUMAN SERVICES FAMILY SUPPORT ADMINISTRATION

PROGRAM:

Community Services Block Grant

PERIOD:

January 1, 2004 through December 31, 2005

The undersigned certifies, to the best of his or her knowledge and belief, that:

- (1) No Federal appropriated funds have been paid or will be paid by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.
- (2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.
- (3) The undersigned shall require that the language of this certification be included in the award document for subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Title	Signature		
Agency/Organization	Date		

Complete the form to disclose lobbying activities pursuant to 31 U.S.C. 1352 (See reverse for public burden disclosure.)

a. contract b. grant c. cooperative agreement d. loan e. loan guarantee f. loan insurance	2. Status of Federal Ac a. bid/offer/ap b. initial award c. post-award	plication	Report Type: a. initial filing b. material change For Material Change Only: year quarter date of Last report		
4. Name and Address of Reporting Entity Prime Subawarde Tier ,	ee	If Reporting Entity in No. 4 is Subawardee, Enter Name and Address of Prime:			
Congressional District, if known:		Congressional District, if known:			
6. Federal Department/Agency:			7. Federal Program Name/Description: CFDA Number, If applicable:		
8. Federal Action Number, if known:		9. Award Amount, if	known:		
10. a. Name address of Lobbying Entit (if individual, last name, first, na		b. Individuals Performing Services (including address if different from No. 10a) (last name, first name, MI):			
(atta	ach Continuation Sheet(s	।) SF-LLL-A, <i>if necessar</i>	y)		
11. Amount of Payment (check all that ap	oly):	13. Type of Payment (check all that apply):			
	. –	a. retainer			
\$	actual planned	☐ b. one-time fee			
12. Form of Payment (check all that apply):		☐ c. commission			
☐ a. cash		☐ d. contingent fee			
b. in-kind; specify: nature value		☐ e. deferred			
value		f. other; spe	cify:		
14. Brief Description of Services Performed or to be Performed and Date(s) of Services, including officer(s), employee(s), or Member(s), contacted, for Payment indicated in Item 11:					
(attach Continuation Sheet(s) SF-LLL-A, if necessary)					
15. Continuation Sheet(s) SF-LLL-A atta	ched: Yes N	lo			
16 Information requested through this form is authorized by Title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this		Signature:			
transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1353. This information will be reported to the Congress semi-annually and will		Print Name:			
be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty for not less than \$10,000 and not more than \$100,000 for each such failure.		Title:			
		Telephone No.:	Date:		
Federal Use Only:			Authorized for Local Reproductions Standard Form – LLL		

DISCLOSURE OF LOBBYING ACTIVITIES

CONTINUATION SHEET

Approved by OMB 0348-0046

Reporting Entity:	Page	of

Authorized for Local Reproduction Standard Form - LLL-A

INSTRUCTION FOR COMPLETION OF SF-LLL, DISCLOSURE OF LOBBYING ACTIVITIES

This disclosure form shall be completed by the reporting entity, whether subawardee or prime Federal recipient, at the initiation or receipt of a covered Federal action, or a material change to a previous filing, pursuant to title 31 U.S.C. section 1352. The filing of a form is required for each payment or agreement to make payment to any lobbying entity for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with a covered Federal action. Use the SF-LLL-A Continuation Sheet for additional information if the space on the form is inadequate. Complete all items that apply for both the initial filing and material change report. Refer to the implementing guidance published by the Office of Management and Budget for additional information.

- Identity the type of covered Federal action for which lobbying activity is and/or has been secured to influence the outcome of a covered Federal action.
- 2. Identify the status of the covered Federal action.
- 3. Identify the appropriate classification of this report. If this is a followup report caused by a material change to the information previously reported, enter the year and quarter in which the change occurred. Enter the date of the last previously submitted report by this reporting entity for this covered Federal action.
- 4. Enter the full name, address, city, state and zip code of the reporting entity. Include Congressional District, if known. Check the appropriate classification of the reporting entity that designates if it is, or expects to be, a prime or subaward recipient. Identify the tier of the subawardee, e.g., the first subawardee of the prime is the 1st tier. Subawards include but are not limited to subcontracts, subgrants and contract awards under grants.
- 5. If the organization filing the report in Item 4 checks "Subawardee", then enter the full name, address, city, state and zip code of the prime Federal recipient. Include Congressional District, if known
- 6. Enter the name of the Federal agency making the award or loan commitment. Include at least one organizational level below agency name, if known. For example, Department of Transportation, United States Coast Guard.
- 7. Enter the Federal program name or description for the covered Federal action (item 1). If known, enter the full Catalog of Federal Domestic Assistance (CFDA) number for grants, cooperative agreements, loans, and loan commitments.
- 8. Enter the most appropriate Federal identifying number available for the Federal action identified in item 1 (e.g., Request for Proposal (RFP) number; Invitation for Bid (IFB) number; grant announcement number; the contract, grant, or loan award number; the application/proposal control number assigned by the Federal agency). Include prefixes, e.g., "RFP-DE-90-001."
- 9. For a covered Federal action where there has been an award or loan commitment by the Federal agency, enter the Federal amount of the award/loan commitment for the prime entity identified in item 4 or 5.
- 10. (a) Enter the full name, address, city, state and zip code of the lobbying entity engaged by the reporting entity identified in item 4 to influence the covered Federal action.
- (b) Enter the full name of the individual(s) performing services, and include full address if different from 10 (a). Enter Last Name, First Name, and Middle Initial (MI).
- 11. Enter the amount of compensation paid or reasonably expected to be paid by the reporting entity (item 4) to the lobbying entity (item 10). Indicate whether the payment has been made (actual) or will be made (planned). Check all boxes that apply. If this is a material change report, enter the cumulative amount of payment made or planned to be made.
- 12. Check the appropriate box(es). Check all boxes that apply. If payment is made through an in-kind contribution, specify the nature and value of the in-kind payment.
- 13. Check the appropriate box(es). Check all boxes that apply. If other, specify nature.
- 14. Provide a specific and detailed description of the services that the lobbyist has performed, or will be expected to perform, and the date(s) of any services rendered. Included all preparatory and related activity, not just time spent in actual contact with Federal officials. Identify the Federal official(s) or employee(s) contacted or the officer(s), employee(s), or Member(s) of Congress that were contacted.
- 15. Check whether or not a SF-LLL-A Continuation Sheet(s) is attached.
- 16. The certifying official shall sign and date the form, print his/her name, title, and telephone number.

Public reporting burden for this collection of information is estimated to average 30 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budgets. Paperwork Reduction Project (0348-0046), Washington, D.C. 20503.

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2004/05 Community Services Block Grant (CSBG) Reporting Forms

- CSBG Expenditure Report (Bimonthly) CSD 425.ER
- CSBG Programs Report, CSD 415 CPR
- Client Characteristic Report, CSD 295-CCR
- Semiannual Safety Net Client Contact Report, CSD 296-SNCC.

Please use these forms as masters and duplicate them for your administrative and programmatic staff's use in the 2004/05 CSBG Contract

State of California
Department of Community Services and Development
CSBG Programmatic Data-Client Characteristic Report (Semi-Annual)
CSD 295-CCR (Rev 2/04)

1	Contractor Name:						Contract #:		
	Prepared By (print na	ame/title):					Report Perio	d:	
Please report demographic client data for both Family Development Clients and Safety Net Clients on this form. Note: Complete demographics are required for Family Development Clients and agencies should make every attempt to collect demographic data on Safety Net Clients.									
2	Total unduplicated nu	umber of per	sons about who	m one or more o	haracte	ristics were obtained			
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		· Otal			ı				

Date:

 $^{^{\}star}$ The sum in this category should not exceed the value of item 2.

^{**} The sum in this category should not exceed the value of item 7e-h.

^{***} The sum in this category should not exceed the value of item 4.

^{****} The numbers reported under either column should not exceed the value of Item 2.

CSBG Demographic Report CSD 295-CCR

Informational

This reporting form is to be used for all Family Development Case Management and Safety Net clients served.

Instructions

Item 1: Enter the date, contractor name, report period, preparer's name and contract number.

Enter data for all categories listed. Data should include demographics for Family Development Case Management clients as well as Safety Net clients. Agencies are to make every attempt to collect demographics on all of the clients applying for services.

Item 2: Total unduplicated number of persons about whom one or more characteristics were obtained: To obtain unduplicated counts, an agency will need to have a system to distinguish each individual so the number of services the individual is provided can be assigned to that individual. For example, if a person enters an agency and receives seven different services, an unduplicated count would record one person, *not* seven services.

<u>Item 3: Total unduplicated number of persons about whom no characteristics were obtained:</u> Enter the total the number of persons for whom characteristics were not obtained. Please note: These items should include all persons served in a local CSBG agency. If an agency cannot provide demographic characteristics for all persons it has counted, please note the unduplicated number of persons who were served but did not have demographic information reported.

Item 4: Total unduplicated number of families about whom one or more characteristics were obtained: This requires that a similar system of unique identifiers be in place, which, in addition to identifying an individual, also identifies a family. For example, if a family member comes in and receives four services and another family member comes in and receives six services, an unduplicated count would record one family, *not* ten services, or two individuals. Agencies generally append the family code to all family members' individual identifiers.

Item 5: Total unduplicated number of families about whom no characteristics were obtained: Enter the total number of families for whom characteristics were not obtained. Please note: These items should include all families served in a local CSBG agency. If an agency cannot provide demographic characteristics for all families it has counted, please note the unduplicated number of families who were served but did not have demographic information reported.

Items 6-10: Characteristics of Individual Clients Receiving Services

<u>Item 6.a - Item 6.b: Gender:</u> Gender should be noted as either male or female for each individual receiving services. *If all clients listed in Item 2 reported their gender, the sum of Item 6.a and Item 6.b should be equal to Item 2. The sum should not exceed the value in Item 2.*

<u>Item 7.a - Item 7.h: Age:</u> This item applies only to the individual who is *receiving* services. Most agencies record the date of birth and later tally ages annually to provide this information. *If all clients listed in Item 2 reported their age, the sum of Item 7.a through Item 7.h should be equal to Item 2. The sum should not exceed the value in Item 2.*

Item 8.I.a-b and Item 8.II.a-d: Ethnicity and Race: This item concerns only the individual who is *receiving* services. We are seeking information on the ethnicity and race of clients. Please select one ethnicity category and one racial catagory for each individual. Ethnicity and race shall be determined by self-identification to the greatest extent possible. The ethnic and racial categories should not be interpreted as being primarily biological or genetic in reference. Ethnicity and race may be thought of in terms of social and cultural characteristics as well as ancestry. *If all clients listed in Item 2 reported their ethnicity the sum of Item 8.I.a through Item 8.I.b should be equal to Item 2. If all clients listed in Item 2 reported their race the sum of Item 8.II.a through Item 8.II.d should be equal to Item 2. The sum of 8.I and the sum of 8.II should not exceed the value in Item 2.*

<u>Item 9.a - Item 9.e: Education:</u> Please note that this item only applies to individuals 24 years of age or older. *If all clients listed in Item 2 reported their education, the sum of Item 9.a through Item 9.e should be equal to Item 2. The sum should not exceed the value of Item 7e-h.*

<u>Item 10.a - Item 10.b:</u> Other characteristics: Please note: We are attempting to gather the total number of individuals responding to each of these particular questions. This requires that all clients responding to the question be represented in the "number surveyed" column. For Item 10.a, every individual who responded to this question should be included in the "number surveyed" column. Only those responding who do *not* have health insurance should be included in the "number of persons" column. Do not count any other family members. If an individual receiving services has any form of health insurance, including Medicare or Medicaid, they should be included in the "number surveyed" column only.

For Item 10.b every individual who responded to this question should be included in the "number surveyed" column. Only those responding who are disabled should be included in the "number of persons" column. The definition of "disabled" used in this form is taken from the Americans With Disabilities Act of 1990: "The term disability means, with respect to an individual - (a) a physical or mental impairment that substantially limits one or more of the major life activities of such individual, (b) a record of such an impairment, (c) being regarded as having such an impairment." Any individual who responded to this question but is not disabled should be included in the "number served" column only.

The numbers reported in Item 10a and Item 10b, under either column should not exceed the number of individuals reported in Item 2.

Items 11-15: Characteristics of Families Receiving Services

<u>Item 11.a - Item 11.f: Family Type:</u> Based on the composition of the family of the recipient, one of the five family types should be noted. If the family type of the recipient is not reflected in one of these types please mark "other." If more than one member of a family receives services, the family should only be counted once. *If all families listed in Item 4 reported their family type, the sum of Item 11.a through Item 11.f should be equal to Item 4. The sum should not exceed the value in Item 4.*

- <u>Item 12.a Item 12.h: Family Size</u>: Please enter the number of people in the family of the person receiving services. *If all families listed in Item 4 reported their family size, the sum of Item 12.a through Item 12.h should be equal to Item 4.*The sum should not exceed the value in Item 4.
- <u>Item 13.a Item 13.k: Source of Family Income:</u> Please enter the type or types of income received by all persons in the family. It is understood that a family may have several sources of income, please indicate all sources of income for each family. Food Stamps, Medicaid and other in-kind benefits (LIHEAP, WAP, etc.) will not be included in these calculations.
 - <u>Item 13.a:</u> <u>Unduplicated # of Families Reporting Income Source</u>: With this item we are attempting to collect an *unduplicated* count of families who provided information on sources of income. If all families reported on their source(s) of income, the number would match the figure in Item 4.
 - <u>Item 13.b:</u> No Income: If there is no source of income, please enter the unduplicated number of families who report no source of income.
 - <u>Item 13.c: TANF:</u> Enter the unduplicated number of families who receive funds from the HHS Temporary Assistance for Needy Families program.
 - <u>Item 13.d: SSI Supplemental Security Income:</u> This is federal assistance usually provided to persons whose Social Security payments are inadequate. Please enter the unduplicated number of families who receive SSI benefits.
 - Item 13.e: Social Security: Enter the unduplicated number of families who receive Social Security benefits.
 - <u>Item 13.f: Pension</u>: Any type of income earned from private pensions, e.g., company retirement, IRA income or 401(k)(Keough). Please enter the number of families who receive Pension benefits.
 - <u>Item 13.g: General Assistance:</u> This is usually a state-funded program available for emergencies and in some instances becomes a regular source of income for single clients. It has a variety of names, for instance, in some states it is called General Relief. Please enter the unduplicated number of families that receive General Assistance.
 - <u>Item 13.h: Unemployment insurance payments:</u> Enter the unduplicated number of families that receive Unemployment Insurance payments.
 - <u>Item 13.i:</u> <u>Employment plus any other sources</u>: Enter the unduplicated number of families that have income from employment *and* from any other sources such as those included in this list.

<u>Item 13.j:</u> <u>Employment only</u>: Please enter the unduplicated number of families for whom employment is the only source of income. Employment is considered wages and salaries before deductions and self-employed income less operating expenses. Items 13.i and 13.h are mutually exclusive.

<u>Item 13.k: Other</u>: Enter the unduplicated number of families that report other sources of income, including investments, rent, etc.

<u>Item 14.a - Item 14.f: Level of Income</u>: This item refers to income levels of the families served compared to the current HHS Poverty Income Guidelines, published annually in the Federal Register. *If all families listed in Item 4 reported on their level of income, the sum of Item 14.a through Item 14.f should be equal to Item 4. The sum should not exceed the value in Item 4.*

Item 15.a - Item 15.d: Housing:

Item 15.a: Own: Please enter the number of families that own their home.

<u>Item 15.b:</u> Rent: Please enter the number of families that rent their housing. Rent can be considered as money or services exchanged for housing and payment of a portion of rent in units shared with others.

Item 15.c: Homeless: Please enter the number of families that were homeless. The definition of the term "Homeless" used for this form, taken from the Stewart B. McKinney Homeless Assistance Act, follows: "Homeless" or "homeless individual" includes: (1) An individual who lacks a fixed, regular, and adequate nighttime residence; and (2) An individual who has a primary nighttime residence that is: A supervised, publicly or privately operated shelter designed to provide temporary living accommodations (including welfare hotels, congregate shelters, and transitional housing for the mentally ill); An institution that provides a temporary residence for individuals intended to be institutionalized; A temporary, makeshift arrangement in the accommodations of other persons or A public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings." The term "homeless" or "homeless individual" does not include any individual imprisoned or otherwise detained pursuant to an Act of the Congress or a State law.

<u>Item 15.d:</u> Other: If neither Item 15.a, Item 15.b nor Item 15.c describe the family's housing situation, record them here.

If all families listed in Item 4 reported their housing, the sum of Item 15.a through Item 15.d should be equal to Item 4. The sum should not exceed the value in Item 4.

<u>Item 16.a – 16.c: Other Family Characteristics:</u>

Item 16.a: Farmer: Enter the number of families served who are farmers.

Item 16.b: Migrant Farmworker: Enter the number of families served who are migrant farm workers.

Item 16.c: Seasonal Farmworker: Enter the number of families served who are seasonal farm workers.

SAFETY-NET SERVICES CLIENT CONTACT FORM CSD 296-SNCC

Informational

This reporting form is to be used if the service/activity does not provide for an assessment process where the client's status and/or goals are recorded. In general, the services recorded are "one-time" services.

Instructions

Enter the date, contractor name, report period, preparer's name and contract number.

Type of Safety-Net Services: Enter the number of client contacts of the male and female clients served in the appropriate safety-net categories.

CLIENT CONTACT: It is nearly impossible to collect an unduplicated count of clients that receive safety-net services. When a client receives safety-net services, it is counted as a client contact within the specific type of service. The number of client contacts (formerly "service units") is determined by the number of times (frequency) a client receives a specific safety-net service. An example of a client contact would be when a client receives a bag of groceries. A telephone conversation with a client regarding services is a client contact. A bed night at a shelter is a client contact, as is a hotel voucher for one-night. A crisis counseling session lasting all day would be one client contact; attendance one hour per day for five days would be counted as five client contacts.

Description

FOOD DISTRIBUTION: Supplies and services, nutritious foodstuffs, and related services necessary to counteract conditions of starvation and malnutrition among the poor. Includes preparation of food baskets, surplus commodities distribution, food programs for both transient and indigenous homeless persons, and brown bags.

SHELTER (BED NIGHTS): Temporary shelter for the homeless, battered women's shelters, and hotel vouchers for bed nights.

CRISIS COUNSELING: Counseling and intervention in emergencies such as those resulting from child, spouse, alcohol or drug abuse, illness or unemployment. Includes counseling for battered women and crisis hot lines. Can also include mediation or in cases where loss of benefits from programs such as TANF or Food Stamps should cause family emergencies.

FINANCIAL ASSISTANCE: One-time payments to families or individuals to help them meet emergency needs for shelter, food, clothing, fuel, transportation, etc. Includes short-term loans to families or individuals to help them meet their emergency needs.

TRANSPORTATION: Transportation provided to assure that community resources are accessible to low-income participants.

EMPLOYMENT-RELATED ASSISTANCE: Limited intervention and referral services.

HEALTH SERVICES: Medical or dental screening, immunization, pregnancy-related, maternal and infant health, and treatment of alcohol/drug abuse. Includes education on AIDS and other STDs.

OTHER EMERGENCY SERVICES: Emergency Services that do not fit into the categories mentioned above.

Definitions

CLIENT: A client is a person applying for services, either for him/herself or on behalf of his/her family members.

SAFETY-NET (EMERGENCY SERVICES): From Section 676(b)(1)(A)(vi) of the Coates Human Services Reauthorization Act of 1998: Public Law 105-285: funds made available through the grant or allotment will be used to support activities that are designed to assist low-income families and individuals, including families and individuals receiving assistance under part A of title IV of the Social Security Act (42 U.S.C. 601 et seq), homeless families and individuals, migrant or seasonal farm workers and elderly low-income individuals and families to obtain emergency assistance through loans, grants or other means to meet immediate and urgent family and individual needs. From Section 676(b)(4) of the Coates Human Services Reauthorization Act of 1998: Public Law 105-285: agencies will provide, on an emergency basis, for the provision of such supplies and services, nutritious foods and related services, as may be necessary to counteract conditions of starvation and malnutrition among low-income individuals.

Enter the demographic data of the male and female clients applying for Safety Net services on CSD form 295-CCR.

Agencies are to make every attempt to collect demographics on all of the clients applying for safety-net services.

State of California
Department of Community Services and Development
CSBG Programmatic Data – Safety Net Client Contact Report (Semi-Annual)
CSD 296-SNCC (New 3/01)

Contractor Name:	Date:
Prepared by (Name & Title):	Report Period:
Telephone Number:	Contract #:

The data reported is for the report period listed above. See Instructions tab for information on how to complete this reporting form.

Demographic information will be entered on the Client Characteristics Report, form CSD 295-CCR. Agencies are to make every attempt to collect demographics on all of the clients applying for safety-net services.

This form is used to record the number of Client Contacts for Safety Net Services.

SAFETY-NET (EMERGENCY) SERVICES PROVIDED

SAFETT-NET (EMERGENC	I) SERVICES PROVIDED				
Type of Safety Not Saminos	Enter Number of Client Contacts				
Type of Safety-Net Services	Female	Male			
Food Distribution					
Shelter (i.e. Bed Nights)					
Crisis Counseling					
Financial Assistance					
Transportation					
Employment-Related Assistance					
Health Services					
Other Emergency Services					
Total					

State of California Department of Community Services and Development CSBG Program Report CSD 415 (New 1/03)

Background:

This form/report is used as a Community Action Plan (CAP) form, a Contract form, a Mid-Year Progress Report, and an Annual Report. This form is used to establish CAP projections and goals over a two-year period, as well as capture Contract projections and goals over a one-year period. The Progress Report and Annual Report will capture the agency's success in accomplishing the goals. The goals and outcome measures used in the CSD 415 are National Goals and Measures in which CSD is required to annually report on to the U.S. Health and Human Services Agency, Office of Community Services (OCS), and the National Association of Community Service Programs (NASCSP).

There are six (OCS) Goals under which CSD is required to track and report outcomes to OCS and NASCSP. Under each goal are the service categories and measures that capture outcomes, which contribute to the accomplishment of the OCS goal. The CSD 415 is broken down by OCS Goal and under each goal is a list of service categories and outcome measures that pertain to that goal. The listed measures (referred to on the forms as outcome measures) were created, and taken from the OCS Monitoring and Assessment Task Force (MATF) National Goals and Outcome Measures. The MATF gave each measure a letter; therefore in the left column of this form the OCS Measure letter is referenced for your information.

Completing the CAP form:

- This report is created in a excel template and designed to be completed on the PC using excel. Please download the template at www.csd.ca.gov under "what's new". The form can then be saved to your PC hard drive and completed. The CSD 415 is one (1) workbook, broken down into eight (8) worksheets. At the bottom of the excel screen will be tabs labeled for each goal (1-6) as well as instructions and a mapping guide.
- Put an X in the upper right hand box, indicating this form is a Community Action Plan form
 – this
 form will cover the two year CAP period and project the goals of the agency throughout the CAP.
- Be sure to completely fill out the Contractor Name, Contract Number (when submitting a CAP, write CAP in the space provided for Contract Number), Contact Person, Phone Number, e-mail, fax and date at the top of each OCS Goal your agency is reporting on.
- **Problem Statement:** Problem statements identified must be supported in the needs assessment and goal-setting process. Briefly address the following components:
 - What is the Problem?
 - What is the cause of the problem?
 - · Who is affected?
 - Location of those affected?
- Program Activities and Delivery Strategies: Enter all of the planned activities and delivery strategies necessary to achieve the outcome measures and goal. Include a description of services along with a brief explanation of how those services will be delivered.

- Outcome Measures: The Outcome Measures have been standardized using the OCS MATF National Goals and Outcomes measures. (Available on the CSD web site as a reference)
 - o Please answer all measures that apply to your agency's work.
 - Each outcome measure has five columns for data at the right. Only the left two (2) columns should be completed for the CAP form:
 - ✓ Number of Units (# to be served): enter the number to be served for that outcome measure during the CAP. (Note: for some of the outcome measures this column does not apply therefore, the column has been shaded and does not require data, however all columns not shaded must be filled in.)
 - ✓ Expected to Achieve Outcome (Goal): enter the number expected to achieve the outcome measure during the CAP. (Note: for some of the outcome measures this column does not apply therefore, the column has been shaded and does not require data, however all columns not shaded must be filled in.)
 - All data should reflect the projected outcomes to be tracked during the CAP Period. The CAP form will capture projections for the entire two-year period.
 - Enter projections for each program that fits into the definition of the OCS Goal and NASCSP service category. Please refer to the Terminology and Lexicon document under the "What's New" section of the CSD web page for the NASCSP and OCS definitions of the Service Categories.
 - All PROJECTIONS should be NUMERICAL. If the question is not applicable to your agency's work, or data pertaining to that question is not available leave the cell blank. Do not use zeros (0), percentages or fractions.
 - A CSD Dimension/NASCSP Service Category Mapping Guide is also included and should be used to clarify where data should be placed when the California Matrix Dimensions are used to track outcomes. (i.e. If data will be collected using the Youth Education and Development Dimension under the Family Development Matrix, locate that CSD dimension on the mapping guide under the CSD Matrix Dimension column, then to the right of the CSD Dimension will be the corresponding NASCSP service category and goal in which that data would be reported under.)

Submitting the CAP form

This report shall be downloaded and completed using excel. For the CAP, please print and submit the CSD 415 in hard copy with your CAP. To print the CSD 415, go to *file*, *print* and in the "print what" section choose *entire workbook*. The entire workbook option will print each page in the workbook for submission. The CAP is due to your Field Representative by June 30, 2003.

If you have any questions please contact your assigned Field Representative.

State of California Department of Community Services and Development CSBG Program Report CSD 415 (New 1/03)

Background:

This form/report is used as a Community Action Plan (CAP) form, a Contract form, a Mid-Year Progress Report, and an Annual Report. This form is used to establish CAP projections and goals over a two-year period, as well as capture Contract projections and goals over a one-year period. The Progress Report and Annual Report will capture the agency's success in accomplishing the goals. The goals and outcome measures used in the CSD 415 are National Goals and Measures in which CSD is required to annual report on to the U.S. Health and Human Services Agency, Office of Community Services (OCS), and the National Association of Community Service Programs (NASCSP).

There are six (OCS) Goals under which CSD is required to track and report outcomes to the NASCSP and OCS. Under each goal are the service categories and measures that capture outcomes, which contribute to the accomplishment of the OCS goal. The CSD 415 is broken down by OCS Goal and under each goal is a list of service categories and outcome measures that pertain to that goal. The listed measures (referred to on the forms as outcome measures) were created, and taken from the OCS Monitoring and Assessment Task Force (MATF) National Goals and Outcome Measures. The MATF gave each measure a letter; therefore in the left column of this form the OCS Measure letter is referenced for your information.

Completing the Contract form

- This report is created in a excel template and designed to be completed on the PC using excel. Please download the template at www.csd.ca.gov under "what's new". The form can then be saved to your PC hard drive and completed. The CSD 415 is one (1) workbook, broken down into eight (8) worksheets. At the bottom of the excel screen will be tabs labeled for each goal (1-6) as well as instructions and a mapping guide.
- Put an X in the upper right hand box, indicating this form is a Contract form—this form will cover the contract period and project the goals of the agency throughout the contract term.
- Be sure to completely fill out the Contractor Name, Contract Number, Contact Person, Phone Number, e-mail, fax and date at the top of each OCS Goal your agency is reporting on.
- **Problem Statement:** Problem statements identified must be supported in the needs assessment and goal-setting process. Briefly address the following components:
 - What is the Problem?
 - What is the cause of the problem?
 - Who is affected?
 - Location of those affected?
- Program Activities and Delivery Strategies: Enter all of the planned activities and delivery strategies necessary to achieve the outcome measures and goal. Include a description of services along with a brief explanation of how those services will be delivered.

- Outcome Measures: The Outcome Measures have been standardized using the OCS MATF National Goals and Outcomes measures. (Available on the CSD web site as a reference)
 - Please answer all measures that apply to your agency's work.
 - Each outcome measure has five columns for data at the right. Only the left two (2) columns should be completed for the Contract form:
 - ✓ Number of Units (# to be served): enter the number to be served for that outcome measure during the contract term. (Note: for some of the outcome measures this column does not apply therefore, the column has been shaded and does not require data, however all columns not shaded must be filled in.)
 - ✓ Expected to Achieve Outcome (Goal): enter the number expected to achieve the outcome measure during the contract term. (Note: for some of the outcome measures this column does not apply therefore, the column has been shaded and does not require data, however all columns not shaded must be filled in.)
 - All data should reflect the projected outcomes to be tracked during the CSBG Contract Period. The Contract form will capture projections for the entire program year.
 - Enter projections for each program that fits into the definition of the OCS Goal and NASCSP service category. Please refer to the Terminology and Lexicon document under the "What's New" section of the CSD web page for the NASCSP and OCS definitions of the Service Categories.
 - All PROJECTIONS should be NUMERICAL. If the question is not applicable to your agency's work, or data pertaining to that question is not available leave the cell blank. Do not use zeros (0), percentages or fractions.
 - A CSD Dimension/NASCSP Service Category Mapping Guide is also included and should be used to clarify where data should be placed when the California Matrix Dimensions are used to track outcomes. (i.e. If data will be collected using the Youth Education and Development Dimension under the Family Development Matrix, locate that CSD dimension on the mapping guide under the CSD Matrix Dimension column, then to the right of the CSD Dimension will be the corresponding NASCSP service category and goal in which that data would be reported under.)

Submitting the Contract form

This report shall be downloaded and completed using excel. For the CAP, please print and submit the CSD 415 in hard copy with your CAP. To print the CSD 415, go to *file*, *print* and in the "print what" section choose *entire workbook*. The entire workbook option will print each page in the workbook for submission with the contract by the contract due date.

If you have any questions please contact your assigned Field Representative.

Contract Instructions: Page 2 of 2

State of California Department of Community Services and Development CSBG Program Report CSD 415 (New 1/03)

Background:

This form/report is used as a Community Action Plan (CAP) form, a Contract form, a Mid-Year Progress Report, and an Annual Report. This form is used to establish CAP projections and goals over a two-year period, as well as capture Contract projections and goals over a one-year period. The Progress Report and Annual Report will capture the agency's success in accomplishing the goals. The goals and outcome measures used in the CSD 415 are National Goals and Measures in which CSD is required to annual report on to the U.S. Health and Human Services Agency, Office of Community Services (OCS), and the National Association of Community Service Programs (NASCSP).

There are six (OCS) Goals under which CSD is required to track and report outcomes to the NASCSP and OCS. Under each goal are the service categories and measures that capture outcomes, which contribute to the accomplishment of the OCS goal. The CSD 415 is broken down by OCS Goal and under each goal is a list of service categories and outcome measures that pertain to that goal. The listed measures (referred to on the forms as outcome measures) were created, and taken from the OCS Monitoring and Assessment Task Force (MATF) National Goals and Outcome Measures. The MATF gave each measure a letter; therefore in the left column of this form the OCS Measure letter is referenced for your information.

Completing the Mid-Year Progress Report

- This report is created in a excel template and designed to be completed and submitted electronically. The CSD 415 is one (1) workbook, broken down into eight (8) worksheets. At the bottom of the excel screen will be tabs labeled for each goal (1-6) as well as instructions and a mapping guide. The entire workbook must be submitted electronically by the due date to CSBGReports@csd.ca.gov. In the subject line, please indicate the agency name the report is being submitted for.
- Put an X in the upper right hand box, indicating this report is the Mid-Year Progress Report this
 report will cover the term of January through June and will reflect the progress towards achieving
 the contract projections.
- Be sure to completely fill out the Contractor Name, Contract Number, Contact Person, Phone Number, e-mail, fax and date at the top of each OCS Goal your agency is reporting on.
- Outcome Measures: The Outcome Measures have been standardized using the MATF OCS
 National Goals and Outcomes measures. (Available on the CSD web site as a reference)
 - Each outcome measure has five columns for data at the right. The two left columns were filled out with the contract and should remain the same throughout the contract term. Therefore for the Progress Report only the 3 remaining columns should be completed:
 - ✓ Achieved: enter the number that achieved the outcome measure at the time of the report.
 - ✓ Still Progressing: enter the number still progressing towards the outcome measure at the time of this report. (Note: for some of the outcome measures this column does not apply therefore, the column has been shaded and does not require data, however all columns not shaded must be filled in.)

- ✓ Exited Program Prior to Achieving Outcome: enter the number exited prior to achieving the outcome measure at the time of this report. (Note: for some of the outcome measures this column does not apply therefore, the column has been shaded and does not require data, however all columns not shaded must be filled in.)
- All data should reflect the actual outcomes achieved or in progress during the first six months of the program year.
- o Enter outcome data for each measure projections were established on the Contract form.
 - Suggestion: Open the electronic copy of the Contract form previously submitted and enter outcome data for all measures with projections. <u>Do not</u> change the projections in the left two columns, without submitting a Contract form amendment to your Field Representative.
- All DATA FIGURES should be NUMERICAL. Do not use zeros (0), percentages or fractions.

Submitting the Mid-Year Progress Report

This report shall be completed electronically and e-mailed to CSBGReports@csd.ca.gov, by the due date. Remember to include the agency name in the subject line of the e-mail.

If you have any questions please contact your assigned Field Representative.

State of California Department of Community Services and Development CSBG Program Report CSD 415 (New 1/03)

Background:

This form/report is used as a Community Action Plan (CAP) form, a Contract form, a Mid-Year Progress Report, and an Annual Report. This form is used to establish CAP projections and goals over a two-year period, as well as capture Contract projections and goals over a one-year period. The Progress Report and Annual Report will capture the agency's success in accomplishing the goals. The goals and outcome measures used in the CSD 415 are National Goals and Measures in which CSD is required to annual report on to the U.S. Health and Human Services Agency, Office of Community Services (OCS), and the National Association of Community Service Programs (NASCSP).

There are six (OCS) Goals under which CSD is required to track and report outcomes to the NASCSP and OCS. Under each goal are the service categories and measures that capture outcomes, which contribute to the accomplishment of the OCS goal. The CSD 415 is broken down by OCS Goal and under each goal is a list of service categories and outcome measures that pertain to that goal. The listed measures (referred to on the forms as outcome measures) were created, and taken from the OCS Monitoring and Assessment Task Force (MATF) National Goals and Outcome Measures. The MATF gave each measure a letter; therefore in the left column of this form the OCS Measure letter is referenced for your information.

Completing the Annual Report

- This report is created in a excel template and designed to be completed and submitted electronically. The CSD 415 is one (1) workbook, broken down into eight (8) worksheets. At the bottom of the excel screen will be tabs labeled for each goal (1-6) as well as instructions and a mapping guide. The entire workbook must be submitted electronically by the due date to CSBGReports@csd.ca.gov. In the subject line, please indicate the agency name the report is being submitted for.
- Put an X in the upper right hand box, indicating this report is the *Annual Report* this report will cover the term of January through December and will reflect the agency's success in achieving the contract projections.
- Be sure to completely fill out the Contractor Name, Contract Number, Contact Person, Phone Number, e-mail, fax and date at the top of each OCS Goal your agency is reporting on.
- Outcome Measures: The Outcome Measures have been standardized using the MATF OCS National Goals and Outcomes measures. (Available on the CSD web site as a reference)
 - Each outcome measure has five columns for data at the right. The two left columns were filled out with the contract and should remain the same throughout the contract term.
 Therefore, for the Annual Report only the 3 remaining columns should be completed:
 - ✓ Achieved: enter the number that achieved the outcome measure at the time of the report.
 - ✓ Still Progressing: enter the number still progressing towards the outcome measure at the time of this report. (Note: for some of the outcome measures this column does not apply therefore, the column has been shaded and does not require data, however all columns not shaded must be filled in.)

- ✓ Exited Program Prior to Achieving Outcome: enter the number exited prior to achieving the outcome measure at the time of this report. (Note: for some of the outcome measures this column does not apply therefore, the column has been shaded and does not require data, however all columns not shaded must be filled in.)
- All data should reflect the actual outcomes achieved throughout the program year. The
 Annual Report (due Jan 15) is cumulative for the entire year, and will capture the most
 current status of each client, household, partnership etc., under the appropriate column
 for the entire year.
- Enter outcome data for each measure projections were established on the Contract form.
 - Suggestion: Open the electronic copy of the Contract form previously submitted and enter outcome data for all measures with projections. <u>Do not</u> change the projections in the left two columns, without submitting a Contract form amendment to your Field Representative.
 - Please note: The CSD 415, is such, that two 6-month reports <u>cannot be added</u> together. For example, the status of a client may have been "still progressing" on the Progress Report, and "achieved" on Annual Report. Therefore, if the two reports were added together the status of that client would have been counted in two different statuses (columns), which would give an inaccurate representation of the outcomes achieved over the entire year. Therefore, each report measures the success in achieving the specified goals at the time the report is due and will be considered stand-alone reports.
- All DATA FIGURES should be NUMERICAL. Do not use zeros (0), percentages or fractions.

Submitting the Annual Report

This report shall be completed electronically and e-mailed to CSBGReports@csd.ca.gov, by the due date. Remember to include the agency name in the subject line of the e-mail.

If you have any questions please contact your assigned Field Representative.

State of California Department of Community Services and Development CSBG Program Report CSD 415 (New 1/03)

DEFINITIONS

Communities – (Goals 2 and 3) — this could be one (1) or more than one (1) community. The definition will be different for each agency and should tie back to the agency's CAP which identifies the community(ies) that will be served.

Agencies – (Goals 4 and 5) — Each CSBG CSD Contractor is one (1) agency, therefore answer the measures based on the accomplishments of your agency not any contractors.

Boards – (Goals 4 and 5) — Each CSBG CSD Contractor's Board will be considered one (1) Board. Do not include boards of your agency's contractors.

For additional definitions, please reference the NASCSP Terminology and Lexicon located under CSBG on the CSD Web Site at www.csd.ca.gov.

CSD Matrix Dimensions Mapped to NASCSP Service Catagories and Linked to the Six National Goals

CSD Matrix Dimension

NASCSP Service Category

	NASCSP Service Category				
Goal 1: (Self-Sufficiency)					
Low-Income people become more self-sufficient					
Typical Services you would find for Goal 1: Self-Sufficiency, can include, but are not limited to, employment,					
education, and supportive services such as transporation and child care.					
Adult Education and Development	Education				
Youth Education and Development	Education				
Employment	Employment				
Income & Budget	Income Management				
Shelter Housing					
Transportation & Mobility Linkages					
Self-Sufficiency					
Goal 6: (Family Stability) Low-income people, especially vulnerable populations, achieve their potential by strengthening family and other supportive systems.					
Typical Services you would find for Goal 6: Fami	er supportive systems.				
Typical Services you would find for Goal 6: Fami health services and nutrition services.	If Stability, can include, but are not limited to, emergency services,				
Typical Services you would find for Goal 6: Fami health services and nutrition services. Food and Nutrition	er supportive systems. Ily Stability, can include, but are not limited to, emergency services, Nutrition				
Typical Services you would find for Goal 6: Famile health services and nutrition services. Food and Nutrition Safety-Net Services	Ity Stability, can include, but are not limited to, emergency services, Nutrition Emergency Services				
Typical Services you would find for Goal 6: Famile health services and nutrition services. Food and Nutrition Safety-Net Services Health	Pr supportive systems. Ily Stability, can include, but are not limited to, emergency services, Nutrition Emergency Services Health				
Typical Services you would find for Goal 6: Famile health services and nutrition services. Food and Nutrition Safety-Net Services Health Social & Emotional Health Competency	Pr supportive systems. If y Stability, can include, but are not limited to, emergency services, Nutrition Emergency Services Health Health				

Goal 2: (Community Revitalization) The conditions in which low-income people live are improved.

Typical Services you would find for Goal 2: Community Revitalization, are primarily linkages or efforts in other service categories that have a community focus, such as job creation in employment, or housing developments, or first time home buyer programs in housing.

Employment	Employment
Public Policy	Linkages
Equity	Linkages

Goal 3: (Community Revitalization) Low-income people own a stake in their community.

Typical Services you would find for Goal 3: Community Revitalization, are primarily linkages or efforts in other service categories that have a community focus, such as job creation in employment, or housing developments, or first time home buyer programs in housing.

Service & Support Systems	Linkages
Civic Capital	Linkages
Economic Opportunity	Linkages

Goal 4:

Partnerships among supporters and providers of services to low-income people are achieved.

Typical Services you would find for Goal 4: are primarily linkages or efforts in other service categories that support agency capacity efforts.

Client Satisfaction	Linkages
Collaboration	Linkages

Goal 5:

Agencies Increase Their Capacity to Achieve Results

Typical Services you would find for Goal 5: are primarily linkages or efforts in other service categories that support agency capacity efforts.

Fund Development and Leveraging	Linkages
Fiscal & Administrative Health	Linkages
Cultural Sensativity & Competence	Linkages
Staff Development & Staff Morale	Linkages
Planning & Evaluation	Linkages
Governance	Linkages
Mission Integration	Linkages
Self-Sufficiency Impact	Linkages
Community Development Impact	Linkages
Safety-Net Services	Emergency Services

Department of CSBG Progra CSD 415 (Ne	·				Contract For Mid-Year Pro	ogress Report (Jan-Jun)
Contractor	Name:			Contract #:		Amd #
Contact P	erson: Phone:			Date:		
E-mail:	Fax:					
	Goal 1: (Self Low-income people beco			cient.		
separate s	Education Adult Education & Developm Statement: (The space provide below will only accept 1200 characters of database). Activities and Delivery Strategies: (The space provide below will only accept a separate sheet.)	ata including s	spaces and pur	nctuation. If additiona	al space is need	
OCS Measure Letter	Outcome Measures: Education	# of Units (# to be served)	Expected to Achieve Outcome (Goal)	Achieved	Still Progressing Toward Outcome	Exited Program Prior to Achieving Outcome
q	Number of households which demonstrated movement up one or more steps in Adult Education and Development using the Family Development					
s	Matrix. Number of households achieving stability in the Adult Education and			I		
	Development Dimension on the Family Development Matrix.					
q	Number of households which demonstrated movement up one or more					
	steps in Youth Education and Development using the Family Development					L
s	Matrix. Number of households achieving stability in the Youth Education and					
	<u>Development</u> Dimension on the Family Development Matrix.		•	1		
I	Number of people progressing towards and achieving literacy and/or GED. (include Adults and Youth)					
m	Number of people making progress towards and achieving a post-secondar	n/	T	Τ	Т	Τ
'''	degree or vocational training.	"				<u> </u>

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State of California Department of CSBG Program	of Community Services and Development				Community A Contract For	
CSD 415 (Ne					Annual Repo	• • •
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Contact Po	erson: Phone:			Date:		
E-mail:	Fax:					
	Goal 1: (Self-	Sufficier	ıcy)			
	Low-income people beco	me more	e self-suffi	cient.		
separate s	Statement: (The space provide below will only accept 1200 characters of database). Activities and Delivery Strategies: (The space provide below will only acceedable as attach a separate sheet.)	ta including s				
OCS Measure Letter	Outcome Measures: Employment	# of Units (# to be served)	Expected to Achieve Outcome (Goal)	Achieved	Still Progressing Toward Outcome	Exited Program Prior to Achieving Outcome
q	Number of households which demonstrated movement up one or more					
	steps in Employment using the Family Development Matrix.					
s	Number of households achieving stability in the <u>Employment</u> Dimension of the Family Development Matrix.					
а	Number of participants seeking employment who obtained it [as compared					

with the total number of participants.]

CSBG Progra CSD 415 (Ne	·				Annual Repor	gress Report (Jan-Jun) rt (Jan-Dec)
Contractor	Name:			Contract #:		Amd #
Contact Pe	erson: Phone:			Date:		
E-mail:	Fax:					
	Goal 1: (Self- Low-income people beco			cient.		
Problem S separate s	Income Management Statement: (The space provide below will only accept 1200 characters of dat sheet.)				al space is neede	ed please attach a
	Activities and Delivery Strategies: (The space provide below will only acceptable as attach a separate sheet.)	ot 1200 char	acters of data	ncluding spaces and	punctuation. If	additional space is
OCS Measure Letter	Outcome Measures: Income Management	# of Units (# to be served)	Expected to Achieve Outcome (Goal)	Achieved	Still Progressing Toward Outcome	Exited Program Prior to Achieving Outcome
q	Number of households which demonstrated movement up one or more steps in <u>Income & Budget</u> using the Family Development Matrix.		(/			
s	Number of households achieving stability in the <u>Income & Budget</u> Dimension of the Family Development Matrix.					
f	Number of households experiencing an increase in an annual income as a					

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Department of Community Services and Development

result of earnings.

state of Califo Department of CSBG Progra CSD 415 (Ne	of Community Services and Development am Report				Community A Contract For Mid-Year Pro Annual Report	m gress Report (Jan-Jun)
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E-mail:	Fax:					
	Goal 1: (S Low-income people b	Self-Sufficier ecome more		cient.		
Problem \$	LinkagesTran Statement: (The space provide below will only accept 1200 characters sheet.)	-	-	ictuation. If additional	space is need	ed please attach a
	Activities and Delivery Strategies: (The space provide below will only ease attach a separate sheet.)	accept 1200 char	acters of data i	ncluding spaces and p	ounctuation. If	additional space is
OCS Measure Letter	Outcome Measures: Transportation & Mobility	# of Units (# to be served)	Expected to Achieve Outcome (Goal)	Achieved	Still Progressing Toward Outcome	Exited Program Prior to Achieving Outcome
q	Number of households which demonstrated movement up one or more steps in Transportation & Mobility using the Family Development Matrix					

Number of households achieving stability in the $\underline{\text{Transportation}}$ and $\underline{\text{Mobility}}$ Dimension of the Family Development Matrix.

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State of California Department of CSBG Progra CSD 415 (New York Program of CSD 415)	of Community Services and Development am Report				Community A Contract For Mid-Year Pro Annual Repo	m gress Report (Jan-Jun)
Contractor				Contract #:		Amd #
Contact Pe				Date:		
E-mail:	Fax:					
	Goal 1: (Self-	-Sufficier	ıcy)			
	Low-income people beco	ome more	e self-suffi	cient.		
	Housing -					
Problem S separate s	Statement: (The space provide below will only accept 1200 characters of da sheet.)	ata including s	spaces and pur	nctuation. If additiona	al space is need	ed please attach a
	Activities and Delivery Strategies: (The space provide below will only acceeses attach a separate sheet.)	ept 1200 char	acters of data	including spaces and	punctuation. If	additional space is
ocs		# of Units	Expected to		Still	Exited Program
Measure Letter	Outcome Measures: Housing	(# to be served)	Achieve Outcome (Goal)	Achieved	Progressing Toward Outcome	Prior to Achieving Outcome
q	Number of households which demonstrated movement up one or more					
	steps in <u>Shelter</u> using the Family Development Matrix.	-				
S	Number of households achieving stability in the <u>Shelter Dimension</u> of the Family Development Matrix.					
i	Total number of participating families in your shelter program who moved					
	from substandard housing into stable housing. (as compared to the total number of participating families.)		I		1	l
j	Number of households which obtain and/or maintain home ownership.					

k

ownership.

Number of minority households which obtain and/or maintain home

CSBG Progra	of Community Services and Development am Report					m gress Report (Jan-Jun)
CSD 415 (Ne Contractor				Contract #:	Annual Repor	t (Jan-Dec) Amd #
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E-mail:	_			Bate.		
	Goal 6: (Fam					
	come people, especially vulnerable populations, active systems.			al by strength	ening famil	ly and other
Problem S separate s	Nutrition Foo Statement: (The space provide below will only accept 1200 characters of dar heet.)			nctuation. If additiona	l space is neede	ed please attach a
	Activities and Delivery Strategies: (The space provide below will only accesses attach a separate sheet.)	pt 1200 cha	racters of data	including spaces and	punctuation. If	additional space is
OCS Measure Letter	Outcome Measures: Nutrition	# of Units (# to be served)	Expected to Achieve Outcome (Goal)	Achieved	Still Progressing Toward Outcome	Exited Program Prior to Achieving Outcome
k	Number of households moving from in-crisis to stability in the <u>Food and</u> Nutrition Dimension on the Family Development Matrix.					
m	Number of households moving from in-crisis to vulnerable in the Food and Nutrition Dimension of the Family Development Matrix.					

CSBG Progra CSD 415 (Ne					Mid-Year Pro Annual Repor	gress Report (Jan-Jun) t (Jan-Dec)
Contractor	Name:			Contract #:		Amd #
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E-mail:	Fax:			-		
	Goal 6: (Fami	ilv Stabi	litv)			
Low-in	come people, especially vulnerable populations, acl	-	• .	ial by strength	ening fami	lv and other
	tive systems.			.,.		,
separate s	Emergency Services Statement: (The space provide below will only accept 1200 characters of data sheet.) Activities and Delivery Strategies: (The space provide below will only accept ease attach a separate sheet.)	a including s	spaces and pu	nctuation. If additiona		
OCS Measure Letter	Outcome Measures: Emergency Services	# of Units (# to be served)	Expected to Achieve Outcome (Goal)	Achieved	Still Progressing Toward Outcome	Exited Program Prior to Achieving Outcome
С	Number of households in-crisis whose emergency needs were ameliorated. (Services can include, but not limited to: weatherization, utility assistance, legal					
	services [non-case managed], shelter [bed nights, hotel vouchers], brown bag lunches, etc.)					
g	Number of high consumption households realizing a reduction in energy burden.					
k	Number of household moving from in-crisis to stability.				1	
	·				1	
m	Number of households moving from in-crisis to vulnerable.					

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	ew 1/03)				Annual Repor	,
Contractor	r Name:			Contract #:		Amd #
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	Goal 6: (Fam	ily Stabi	lity)			
	come people, especially vulnerable populations, acrive systems.	chieve th	eir potenti	al by strengt	nening fami	ly and other
	Health Health, Social & Emotional Health Co Statement: (The space provide below will only accept 1200 characters of da					
	Activities and Delivery Strategies: (The space provide below will only acceease attach a separate sheet.)	ept 1200 cha	racters of data	including spaces ar	nd punctuation. If	additional space is
OCS Measure Letter	Outcome Measures: Health	# of Units (# to be served)	Expected to Achieve Outcome (Goal)	Achieved	Still Progressing Toward Outcome	Exited Program Prior to Achieving Outcome
k	Number of households moving from in-crisis to stability in the <u>Health</u> Dimension on the Family Development Matrix.		(553.)			
m	Number of households moving from in-crisis to vulnerable in the <u>Health</u> Dimension of the Family Development Matrix.					
k	Number of households moving from in-crisis to stability in the <u>Social & Emotional Health Competency</u> Dimension on the Family Development					
m	Matrix. Number of households moving from in-crisis to vulnerable in the <u>Social &</u> Emotional Health Competency Dimension of the Family Development					
k	Matrix. Number of households moving from in-crisis to stability in the Family					
k	Matrix. Number of households moving from in-crisis to stability in the Family Relations & Parenting Dimension on the Family Development Matrix.					
	Matrix. Number of households moving from in-crisis to stability in the Family					

Mid-Year Progress Report (Jan-Jun)

State of California

CSBG Program Report

CSBG Progra	·				Mid-Year Pro	gress Report (Jan-Jun) t (Jan-Dec)
Contractor				Contract #:		Amd #
Contact Pe	erson: Phone:			Date:		
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	Goal 6: (Fam	ilv Stabi	litv)			
Low-in	come people, especially vulnerable populations, ac	•	• .	ial by strength	ening fami	lv and other
	tive systems.			,.		,
separate s	Catalogue Commistatement: (The space provide below will only accept 1200 characters of data heet.) Activities and Delivery Strategies: (The space provide below will only accept asset attach a separate sheet.)	ta including s	spaces and pur	nctuation. If addition		
OCS Measure Letter	Outcome Measures: Community Involvement	# of Units (# to be served)	Expected to Achieve Outcome (Goal)	Achieved	Still Progressing Toward Outcome	Exited Program Prior to Achieving Outcome
е	Number of households in which there has been an increase in donation of time to volunteer activities (not mandated by welfare-to-work programs).					
f	Number of households in which there has been an increase in children's involvement in extracurricular activities.					
k	Number of households moving from in-crisis to stability in the <u>Community Involvement</u> Dimension on the Family Development Matrix.					
m	Number of households moving from in-crisis to vulnerable in the <u>Community Involvement</u> dimension of the Family Development Matrix.	4				

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State of Califo					Community A	
Department of CSBG Progra	of Community Services and Development				Contract For	m gress Report (Jan-Jun)
CSD 415 (Ne	·				Annual Repor	
Contractor	Name:			Contract #:		Amd #
Contact Pe	erson: Phone:			Date:		
E-mail:	Fax:					
	Goal 6: (Far	nily Stabi	lity)			
Low-in	come people, especially vulnerable populations, a	chieve the	eir potenti	ial by strength	ening fami	ly and other
suppor	tive systems.					
Problem S separate s	Statement: (The space provide below will only accept 1200 characters of d	Shelter lata including s		nctuation. If additiona	al space is need	ed please attach a
	Activities and Delivery Strategies: (The space provide below will only accease attach a separate sheet.)	cept 1200 chai	racters of data	including spaces and	d punctuation. If	additional space is
OCS Measure Letter	Outcome Measures: Housing	# of Units (# to be served)	Expected to Achieve Outcome (Goal)	Achieved	Still Progressing Toward Outcome	Exited Program Prior to Achieving Outcome
k	Number of households moving from in-crisis to stability in the Shelter Dimension on the Family Development Matrix.					
m	Number of households moving from in-crisis to vulnerable in the <u>Shelter</u> Dimension of the Family Development Matrix.					
d	Number of participating families who moved from homelessness or transitional housing into stable standard housing.					

state of Califo Department of CSBG Progra CSD 415 (New	of Community Services and Development am Report ew 1/03)				Community Ad Contract Form Mid-Year Programman Annual Report	m gress Report (Jan-Jun)
Contractor				Contract #:		Amd #
Contact Pe	erson: Phone:			Date:		
-mail:	Fax:					
	Goal 2: (Communi The conditions in which low-inc	-	•	re improved.		
eeparate sl	Linkages Public Statement: (The space provide below will only accept 1200 characters of data sheet.) Activities and Delivery Strategies: (The space provide below will only accepted as attach a separate sheet.)	a including sp	paces and puni			
OCS Measure Letter c	Outcome Measures: Public Policy and Equity Increase in proportion of state and federal funds allocated for meeting	# of Units (# to be served)	Expected to Achieve Outcome (Goal)	Achieved	Still Progressing Toward Outcome	Exited Program Prior to Achieving Outcome
C	emergency and long-term needs of the low-income population.		<u> </u>			
d	Amount of increased access to community services and resources by low-income people in your community. (ie. Jobs, homes, transportation, medical care, child care, etc.)					
i	Number of communities which demonstrated movement up one or more steps in the <u>Public Policy and/or Equity</u> Dimensions on the Community Development Matrix.					

Number of communities achieving stability in the <u>Public Policy and/or Equity</u> Dimensions on the Community Development Matrix.

CSBG Progra					Mid-Year Pro	gress Report (Jan-Jun) rt (Jan-Dec)			
Contractor				Contract #:		Amd #			
Contact Pe	erson: Phone:			Date:					
E-mail:	Fax:								
	Goal 3: (Community Revitalization) Low-Income people own a stake in their community.								
sheet.)	Linkages Service & Support Systems Statement: (The space provide below will only accept 1200 characters of data Activities and Delivery Strategies: (The space provide below will only accepted as a separate sheet.)	a including spac	es and punctuatio	n. If additional space	is needed pleas				
OCS Measure	Outcome Measures: Service & Support Systems, Civic Capital & Economic	# of Units (# to be	Expected to Achieve	Achieved	Still Progressing	Exited Program Prior to Achieving			
Letter	Opportunity	served)	Outcome (Goal)	7.6	Toward Outcome	Outcome			
b	Amount of "community investment" (in dollars) brought into the community by the Network and targeted to low-income people.	у							
е	Increased level of participation of low-income people in advocacy and intervention activities regarding funding levels, distribution policies, oversight and distribution procedures for programs and funding streams targeted for the low-income community.								
i	Number of communities which demonstrated movement up one or more steps in <u>Service and Support Systems, Civic Capital and/or Economic Opportunity Dimensions</u> on the Community Development Matrix.								
j	Number of communities achieving stability in <u>Service and Support Systems</u> , <u>Civic Capital and/or Economic Opportunity</u> Dimensions on the Community Development Matrix.								

State of California

Name:			Contract #:		Amd #
erson: Phone:			Date:		
Fax:					
Go	al 4:				
		es to low-	income peopl	e are achie	ved.
Linkages	Collabora	ation			
Statement: (The space provide below will only accept 1200 characters of d			ectuation. If additiona	al space is neede	ed please attach a
heet.)					
	cept 1200 cha	racters of data i	ncluding spaces and	d punctuation. If	additional space is
ease attach a separate sneet.)					
	# of Units	Expected to		Still	Exited Program
Outcome Measures: Collaboration	(# to be	Achieve Outcome	Achieved	Progressing Toward	Prior to Achieving Outcome
Number of partnerships established and/or maintained with other public ar		(Goal)		Outcome	Outcome
private entities to mobilize and leverage resources to provide services to lo					
	nd				
private entitites to complete the continuum of care for low-income people.					
· · · · · · · · · · · · · · · · · · ·	nd				
private entitites which ensure ethnic, cultural and other special needs considerations are appropriately included in the delivery services system.	L	l l		- 1	
Did your agency demonstrate movement up one or more steps in the					
Collaboration dimension on the Agency Development Matrix?					
	nd				
resource partners to carry out agency mission? (Yes = 1, No= Blank)					
Did your agency establish and maintain commitments to provide resources	9				
to partner organizations that serve agency customers? (Yes = 1, No =					
,					
agency resources to create a programmatic continuum of services with					
outcome-based objectives establishes and maintains a selection process which ensures that low-income community members are elected in public					
Which cheards that low modifie community members are discuss in public					
	Partnerships among supporters and providers Linkages Statement: (The space provide below will only accept 1200 characters of or sheet.) Activities and Delivery Strategies: (The space provide below will only accept assess attach a separate sheet.) Outcome Measures: Collaboration Number of partnerships established and/or maintained with other public are private entities to mobilize and leverage resources to provide services to leverage and the provide entities to complete the continuum of care for low-income people. Number of partnerships established and/or maintained with other public are private entitites to complete the continuum of care for low-income people. Number of partnerships established and/or maintained with other public are private entitites which ensure ethnic, cultural and other special needs considerations are appropriately included in the delivery services system. Did your agency demonstrate movement up one or more steps in the Collaboration dimension on the Agency Development Matrix? (Yes = 1, No = Blank) Did your agency achieve and maintain commitments from other service are resource partners to carry out agency mission? (Yes = 1, No = Blank) Did your agency establish and maintain commitments to provide resource to partner organizations that serve agency customers? (Yes = 1, No = Blank) Did your agency establish and maintain coordination of agency and nonagency resources to create a programmatic continuum of services with outcome-based objectives establishes and maintains a selection process	Phone: Fax: Goal 4: Partnerships among supporters and providers of service statement: (The space provide below will only accept 1200 characters of data including sheet.) Activities and Delivery Strategies: (The space provide below will only accept 1200 characters of data including sheet.) Activities and Delivery Strategies: (The space provide below will only accept 1200 characters attach a separate sheet.) **Outcome Measures: Collaboration** **Outcome Measures: Collaboration** #* of Units (# to be served) Number of partnerships established and/or maintained with other public and private entities to mobilize and leverage resources to provide services to low-income people. Number of partnerships established and/or maintained with other public and private entitites to complete the continuum of care for low-income people. Number of partnerships established and/or maintained with other public and private entitites which ensure ethnic, cultural and other special needs considerations are appropriately included in the delivery services system. Did your agency demonstrate movement up one or more steps in the Collaboration dimension on the Agency Development Matrix? (Yes = 1, No = Blank) Did your agency achieve and maintain commitments from other service and resource partners to carry out agency mission? (Yes = 1, No = Blank) Did your agency establish and maintain commitments to provide resources to partner organizations that serve agency customers? (Yes = 1, No = Blank) Did your agency establish and maintain commitments to provide resources to partner organizations that serve agency customers? (Yes = 1, No = Blank) Did your agency establish and maintain coordination of agency and nonagency resources to create a programmatic continuum of services with outcome-based objectives establishes and maintains as selection process	Phone: Fax: Goal 4: Partnerships among supporters and providers of services to low- Linkages Collaboration Statement: (The space provide below will only accept 1200 characters of data including spaces and pur heet.) Activities and Delivery Strategies: (The space provide below will only accept 1200 characters of data including spaces and pur heet.) Outcome Measures: Collaboration # of Units (# to be save) Coultcome Measures: Collaboration Number of partnerships established and/or maintained with other public and private entities to mobilize and leverage resources to provide services to low income people. Number of partnerships established and/or maintained with other public and private entities to complete the continuum of care for low-income people. Number of partnerships established and/or maintained with other public and private entities which ensure ethnic, cultural and other special needs considerations are appropriately included in the delivery services system. Did your agency demonstrate movement up one or more steps in the Collaboration dimension on the Agency Development Matrix? (Yes = 1, No = Blank) Did your agency establish and maintain commitments from other service and resources to partners to carry out agency mission? (Yes = 1, No = Blank) Did your agency establish and maintain commitments to provide resources to partner organizations that serve agency customers? (Yes = 1, No = Blank) Did your agency establish and maintain coordination of agency and nonagency resources to create a programmatic continuum of services with outcome-based objectives establishs and maintains as election process	Goal 4: Partnerships among supporters and providers of services to low-income people Linkages — Collaboration Statement: (The space provide below will only accept 1200 characters of data including spaces and punctuation. If addition heet.) Activities and Delivery Strategies: (The space provide below will only accept 1200 characters of data including spaces and punctuation. If addition heet.) Activities and Delivery Strategies: (The space provide below will only accept 1200 characters of data including spaces and ease attach a separate sheet.) Outcome Measures: Collaboration ## of Units Expected to Achieve Achieve Served) (Goal) Number of partnerships established and/or maintained with other public and private entities to complete the continuum of care for low-income people. Number of partnerships established and/or maintained with other public and private entities which ensure ethnic, cultural and other special needs considerations are appropriately included in the delivery services system. Did your agency demonstrate movement up one or more steps in the Collaboration dimension on the Agency Development Matrix? (Yes = 1, No = Blank) Did your agency establish and maintain commitments for mother service and resource partners to carry out agency mission? (Yes = 1, No = Blank) Did your agency establish and maintain commitments to provide resources to partner organizations that serve agency customers? (Yes = 1, No = Blank) Did your agency establish and maintain commitments to provide resources to partner organizations that serve agency customers? (Yes = 1, No = Blank)	Fax: Fax: Goal 4:

Mid-Year Progress Report (Jan-Jun)
Annual Report (Jan-Dec)

State of California

CSBG Program Report

CSD 415 (New 1/03)

CSBG Progra CSD 415 (Ne	•				Mid-Year Prog	gress Report (Jan-Jun) rt (Jan-Dec)		
Contractor	Name:			Contract #:		Amd #		
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E-mail:								
	Goa	l 5:						
	Agencies increase their ca	pacity	to achieve re	esults.				
	Linka	ages						
	Problem Statement: (The space provide below will only accept 1200 characters of data including spaces and punctuation. If additional space is needed please attach a separate sheet.)							
oopa.a.o o								
Brogram /	Activities and Delivery Strategies: (The space provide below will only accept	1200 obor	ractors of data incl	uding appear and nun	stuation If add	itional angos is		
	ease attach a separate sheet.)	. 1200 Chai	acters of data inch	uding spaces and pun	ctuation. Il audi	itiorial space is		
ocs		# of	Fun antant to		Still	Exited Program		
Measure	Outcome Measures: Linkages	Units (# to be	Expected to Achieve	Achieved	Progressing Toward	Prior to Achieving		
Letter	Tatal dallan archilland by the conservation	served)	Outcome (Goal)	T	Outcome	Outcome		
а	Total dollars mobilized by the agency.							
b	Total CSBG dollars							
С	Did your agency's board make any changes as a result of periodic assessment? (Yes = 1, No = Blank)							
d	Number of programs which have become more effective as a result of research and data (their own as well as others.)							
е	Number of programs which have become more effective as a result of needs assessment surveys.							
f	Number of families having their situation improved as a result of		1					
'	comprehensive developmental services.							
h	Did your agency increase the number of funding sources and increase the							
	total value of resources available for services to low-income people? (Yes = 1, No = Blank)							
i	Did your agency leverage non-CSBG resources with CSBG resources at a ratio greater than 1:1? (Yes = 1, No = Blank)							
j	Does your agency's board composition accurately represent the ethnic							
,	diversity of the service territory? (Yes = 1, No = Blank)							
k	Does your agency's customers served accurately represents the ethnic diversity of the service territory? (Yes = 1, No = Blank)							
I	Does your agency's staffing component accurately represent the ethnic diversity of the service territory? (Yes = 1, No = Blank)							
m	Number of development contacts as a result of outreach programs.							
n	Number of special populations showing improvement as a result of programs		<u></u>		<u> </u>			
"	aimed at the population.		<u> </u>					
q	Did your agency achieve and maintain compliance with all applicable Federal, State and local statutes, regulations and requirements? (Yes = 1, No = Blank)							
1	= ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '							

State of California

E-mail:	Fax:		
Contact Person:	Phone:	Date	
Contractor Name:		Contract #:	Amd #
CSD 415 (New 1/03)			Annual Report (Jan-Dec)
CSBG Program Report			Mid-Year Progress Report (Jan-Jun)
Department of Community Services and Development			Contract Form
State of California			Community Action Plan

Goal 5: Agencies increase their capacity to achieve results.

Linkages (cont.)								
OCS Measure Letter	Outcome Measures: Linkages	# of Units (# to be served)	Expected to Achieve Outcome (Goal)	Achieved	Still Progressing Toward Outcome	Exited Program Prior to Achieving Outcome		
r	Did your agency achieve and maintain a governance process that is inclusive, representative of, and accountable to the community? (Yes = 1, No = Blank)							
s								
	empowers and develops its employees, has open communications, pays its employees a living wage, and is mission-driven? (Yes = 1, No = Blank)							
t	t Did your agency achieve and maintain a planning, measurement and							
	evaluation system which creates a programmatic, continuum of services with outcome-based objectives, and where the measurements of programs are used to improve services? (Yes = 1, No = Blank)							
u	Did your agency achieve and maintain communication and feedback processes that engage all stakeholders? (Yes = 1, No = Blank)							
V	Did your agency establish and maintain a process where evaluations are used to improve services? (Yes = 1, No = Blank)							
	to improve services! (165 - 1, 140 - Dialik)							

State of California				Community Action Plan
	Services and Development			Contract Form
CSBG Program Report				Mid-Year Progress Report (Jan-Jun)
CSD 415 (New 1/03)				Annual Report (Jan-Dec)
Contractor Name:			Contract #:	Amd #
Contact Person:	Phone:		Date:	
E-mail:	Fax:			
		Goal 5:		
	Agencies increase the		e results.	
	Emergency Servi	ces Safety-Net Ser	vices	
Problem Statement:	(The space provide below will only accept 1200 characters of			pace is needed please attach a
separate sheet.)				
•	and Delivery Strategies: (The space provide below will only	accept 1200 characters of data	a including spaces and pu	unctuation. If additional space is
needed please attach	a separate sheet.)			
ocs		# of Expected	to	Still Exited Program
Measure Letter	Outcome Measures: Emergency Services	(# to be Outcome (G		Toward Outcome
Measure	Outcome Measures: Emergency Services	Units Achieve	e Achieved	Toward Prior to A

Number of clients showing improvement as a result of emergency services

State of California

0

received.

OCS' Monitoring and Assessment Task Force

National Goals and Outcome Measures

Effective October 1, 1999

For each goal that corresponds to the work your agency does, select at least one measure to report on, based on a current needs assessment survey. If you feel that none of the measures under a particular goal is a good measure of the work actually done by your agency, create a measure that more accurately reflects the work you do. In addition, note that some of the measures could easily apply to other goals as well as the one under which they are listed; use them wherever they seem most appropriate to you.

In measures below, number, wherever it appears, is to be expressed in two parts: the actual count, and the baseline total. For example, when the measure is number of households maintaining employment, express it as a factor of the total number of households served by the agency (e.g., 27 out of 86). Do not indicate percentages (e.g., 31.4% or even 31 out of 100, unless your baseline total is actually 100 households); the data need to be aggregated with that of other agencies before percentages are calculated

GOAL 1. (Self-sufficiency) LOW-INCOME PEOPLE BECOME MORE SELF-SUFFICIENT

GOAL 2. (Community Revitalization) THE CONDITIONS IN WHICH LOW-INCOME PEOPLE LIVE ARE IMPROVED

GOAL 3. (Community Revitalization) LOW-INCOME PEOPLE OWN A STAKE IN THEIR COMMUNITY

GOAL 4. PARTNERSHIPS AMONG SUPPORTERS AND PROVIDERS OF SERVICES TO LOW-INCOME PEOPLE ARE ACHIEVED

GOAL 5. AGENCIES INCREASE THEIR CAPACITY TO ACHIEVE RESULTS

GOAL 6. (Family stability) LOW-INCOME PEOPLE, ESPECIALLY VULNERABLE POPULATIONS, ACHIEVE THEIR POTENTIAL BY STRENGTHENING FAMILY AND OTHER SUPPORTIVE SYSTEMS

GOAL 1: (SELF-SUFFICIENCY)

LOW-INCOME PEOPLE BECOME MORE SELF-SUFFICIENT

Direct measures:

- a. Number of participants seeking employment who obtain it [as compared with the total number of participants].
- b. Number of participants maintaining employment for a full twelve months.
- c. Number of households in which adult members obtain and maintain employment for at least ninety days.
- d. Number of households with an annual increase in the number of hours of employment.
- e. Number of households gaining health care coverage through employment.
- f. Number of households experiencing an increase in an annual income as a result of earnings.
- g. Number of households experiencing an increase in annual income as a result of receiving allowable tax credits, such as the earned income and child care tax credits.
- h. Number of custodial households who experience an increase in annual income as a result of regular child support payments.
- i. Number of participating families moving from substandard housing into stable standard housing, as compared with the total number of participating families.
- j. Number of households which obtain and/or maintain home ownership.
- k. Number of minority households which obtain and/or maintain home ownership.
- I. Number of people progressing toward literacy and/or GED.
- m. Number of people making progress toward post-secondary degree or vocational training.
- n. Other outcome measure(s) specific to the work of your agency.

Survey question measures:

- o. Number of clients who consider themselves more self-sufficient since participating in services or activities of the agency.
- p. Number of clients reporting an increase in income since participating in the services of the agency.

Scale measures:

- q. Number of households which demonstrated movement up one or more steps on a scale or matrix measuring self-sufficiency
- r. Number of households achieving positive movement in self-sufficiency as demonstrated by an increase of at least one point in an overall score of a Family Development Scale.
- s. Number of households achieving stability in the _____ dimension of a Family Development Matrix.

GOAL 2: (COMMUNITY REVITALIZATION)

THE CONDITIONS IN WHICH LOW-INCOME PEOPLE LIVE ARE IMPROVED

Direct Measures:

- a. Number of accessible, living wage jobs created and/or retained.
- b. Increase in assessed value of homes as a result of rehabilitation projects.
- c. Increase in proportion of state and federal funds allocated for meeting emergency and long-term needs of the low-income population.
- d. Increase in access to community services and resources by low-income people.
- e. Increase in available housing stock through new construction.
- f. Increase in the availability and affordability of essential services, e.g. transportation, medical care, child care.
- g. Other outcome measure(s) specific to the work done by your agency.

Survey question measures:

h. Number of households who believe the agency has helped improve the conditions in which they live.

Scale measures:

- i. Number of communities which demonstrated movement up one or more steps on a scale or matrix measuring community self-sufficiency, community health, or community vitality.
- j. Number of communities achieving stability in the _____ dimension of the Community Scaling Tool.

GOAL 3: (COMMUNITY REVITALIZATION)

LOW-INCOME PEOPLE OWN A STAKE IN THEIR COMMUNITY

Direct measures:

- a. Number of households owning or actively participating in the management of their housing.
- b. Amount of "community investment" brought into the community by the Network and targeted to low-income people.
- c. Increase in minority businesses owned.
- d. Increase in access to capital by minorities.
- Increased level of participation of low-income people in advocacy and intervention
 activities regarding funding levels, distribution policies, oversight, and distribution
 procedures for programs and funding streams targeted for the low-income community.
- f. Other outcome measure(s) specific to the work done by your agency.

Survey question measures:

- g. Number of households participating or volunteering in one or more groups.
- h. Number of households who say they feel they are part of the community.

Scale measures

- i. Number of communities which demonstrated movement up one or more steps on a scale or matrix measuring community self-sufficiency, community health, or community vitality.
- j. Number of communities achieving stability in the _____ dimension of the Community Scaling Tool.

GOAL 4:

PARTNERSHIPS AMONG SUPPORTERS AND PROVIDERS OF SERVICES TO LOW-INCOME PEOPLE ARE ACHIEVED

Direct measures:

- a. Number of partnerships established and/or maintained with other public and private entities to mobilize and leverage resources to provide services to low-income people.
- b. Number of partnerships established and/or maintained with other public and private entities to complete the continuum of care for low-income people.
- c. Number of partnerships established and/or maintained with other public and private entities which ensure ethnic, cultural, and other special needs considerations are appropriately included in the delivery service system.
- d. Other outcome measure(s) specific to the partnerships created by local agencies.

Survey question measures:

- e. Number of principal partners who are satisfied with the partnership.
- f. Partner's rating of the responsiveness of the agency.

Scale Measures:

- g. Number of agencies which demonstrated movement up one or more steps on a scale or matrix measuring agency partnership capacity.
- h. Number of agencies achieving stability in the _____ dimension of an agency partnership capacity scaling tool.
- i. Number of agencies that achieve and maintain commitments from other service and resource partners to carry out agency mission.
- j. Number of agencies that establish and maintain commitments to provide resources to partner organizations that serve agency customers.
- k. Number of agencies that establish and maintain coordination of agency and non-agency resources to create a programmatic continuum of services with outcome-based objectives establishes and maintains a selection process which ensures that lowincome community members are elected in a public process.

GOAL 5:

AGENCIES INCREASE THEIR CAPACITY TO ACHIEVE RESULTS

Direct measures:

- Total dollars mobilized by the agency.
- b. Total dollars mobilized by the agency as compared with CSBG dollars.
- c. Number of boards making changes as a result of a periodic organizational assessment.
- d. Number of programs which have become more effective as a result of research and data (their own as well as others).
- e. Number of programs which have become more effective as a result of needs assessment surveys.
- f. Number of families having their situation improved as a result of comprehensive developmental services.
- g. Increase in community revitalization as a result of programs.
- h. Number of agencies increasing their number of funding sources and increasing the total value of resources available for services to low-income people.
- i. Number of agencies leveraging non-CSBG resources with CSBG resources at a ratio greater than 1:1.
- j. Number of agencies where board composition accurately represents the ethnic diversity of the service territory.
- k. Number of agencies where customers served accurately represents the ethnic diversity of the service territory.
- I. Number of agencies where staffing component accurately represents the ethnic diversity of the service territory.
- m. Number of development contacts as a result of outreach programs.
- n. Number of special populations showing improvement as a result of programs aimed at the population.
- o. Number of clients showing improvement as a result of emergency services received.
- p. Other outcome measure(s) specific to the work done by local agencies.

Scale measures:

- q. Number of agencies that achieve and maintain compliance with all applicable federal, state, and local statutes, regulations, and requirements.
- r. Number of agencies that achieve and maintain a governance process that is inclusive, representative of, and accountable to the community.
- s. Number of agencies that achieve and maintain a workforce environment which empowers and develops its employees, has open communications, pays its employees a living wage, and is mission-driven.
- t. Number of agencies which achieve and maintain a planning, measurement, and an evaluation system which creates a programmatic, continuum of services with outcomesbased objectives, and where the measurements of programs are used to improve services.

OCS MATF National Goals and Outcome Measures

- u. Number of agencies that achieve and maintain communication and feedback processes that engage all stakeholders.
- v. Number of agencies that establish and maintain a process where evaluations are used to improve services.

GOAL 6: (Family stability)

LOW-INCOME PEOPLE, ESPECIALLY VULNERABLE POPULATIONS, ACHIEVE THEIR POTENTIAL BY STRENGTHENING FAMILY AND OTHER SUPPORTIVE SYSTEMS

Direct measures:

- a. Number of aged households maintaining an independent living situation.
- Number of disabled or medically challenged persons maintaining an independent living situation.
- c. Number of households in crisis whose emergency needs are ameliorated.
- d. Number of participating families moving from homeless or transitional housing into stable standard housing.
- e. Number of households in which there has been an increase in donation of time to volunteer activities (not mandated by welfare-to-work programs).
- f. Number of households in which there has been an increase in children's involvement in extracurricular activities.
- g. Number of high consumption households realizing a reduction in energy burden.
- h. Number of households moving from cultural isolation to involvement with their cultural community.
- i. Other outcome measure(s) specific to the work done by your agency.

Survey question measure:

j. Number of households indicating improved family functioning since participating in the services or activities of the agency.

Scale measures:

- Number of households moving from crisis to stability on one dimension of a scale.
- Number of households moving from vulnerability to stability on one dimension of a scale.
- m. Number of households moving from a condition of crisis to a condition of vulnerability on one dimension of a scale.